

Department of Human Services  
Bureau of Human Service Licensing  
LICENSING INSPECTION SUMMARY - PUBLIC

February 28, 2025

[REDACTED], ADMINISTRATOR  
CATHOLIC SENIOR HOUSING & HEALTH CARE SERVICES INC  
1200 SPRING STREET  
BETHLEHEM, PA, 18018

RE: GRACE MANSION  
1200 SPRING STREET  
BETHLEHEM, PA, 18018  
LICENSE/COC#: 21643

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/08/2025 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,

[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: GRACE MANSION License #: 21643 License Expiration: 11/24/2025  
 Address: 1200 SPRING STREET, BETHLEHEM, PA 18018  
 County: LEHIGH Region: NORTHEAST

**Administrator**

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

**Legal Entity**

Name: CATHOLIC SENIOR HOUSING & HEALTH CARE SERVICES INC  
 Address: 1200 SPRING STREET, BETHLEHEM, PA, 18018  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: C-2 LP Date: 01/28/1993 Issued By: L & I

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 14 Waking Staff: 11

**Inspection Information**

Type: Full Notice: Unannounced BHA Docket #:  
 Reason: Renewal Exit Conference Date: 01/08/2025

**Inspection Dates and Department Representative**

01/08/2025 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 28 Residents Served: 12  
 Secured Dementia Care Unit  
 In Home: No Area: Capacity: Residents Served:  
 Hospice  
 Current Residents: 0  
 Number of Residents Who:  
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 12  
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 2 Have Physical Disability: 0

**Inspections / Reviews**

01/08/2025 - Full  
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/09/2025

02/24/2025 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: 02/27/2025  
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/28/2025

Inspections / Reviews *(continued)*

02/26/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/27/2025

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 02/28/2025

02/28/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/27/2025

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42s - Privacy

1. Requirements

2600.

42.s. A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.

Description of Violation

The home does not have a written policy regarding the use of voice-controlled electronic devices.

Plan of Correction

Accept (█ - 02/26/2025)

At the time of inspection, no resident had a voice controlled electronic. Administratio wrote a policy regarding the use of voice-controlled electronics and implemented the document immediately. Reviewed policy with residents on 2/12/25 at resident counsel and asked to sign consent form which will be kept in chart with admission forms. For all new residents moving into home, this policy will be reviewed. We will review this policy yearly at resident counsel. Held a staff training session on policy and include training in education binder on 2/12/25. Staff signatures attached.

Licensee's Proposed Overall Completion Date: 02/24/2025

Implemented (█ - 02/28/2025)

141b1 - Annual Medical Evaluation

2. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident #1's annual Documentation of Medical Evaluation dated █ does not note the resident's height.

Plan of Correction

Accept (█ - 02/24/2025)

Height on DME was fixed immediately after finding with approval from █. on 1/10/25 audit was completed on all DME's. Audit all resident DME's twice monthly for 6 months and once a month for the following 6 months. A second signature checking the DME's will also be required. The responsible parties will be Administrator, resident care coordinator or Director Clinical Operations

Licensee's Proposed Overall Completion Date: 12/31/2025

Implemented (█ - 02/28/2025)