

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

September 3, 2025

[REDACTED]
THE BIRCHES OF LEHIGH OPCO LLC
[REDACTED]

RE: THE BIRCHES OF LEHIGH VALLEY
5030 FREEMSBURG AVE
EASTON, PA, 18045
LICENSE/COC#: 23231

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/17/2025 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: THE BIRCHES OF LEHIGH VALLEY License #: 23231 License Expiration: 05/24/2026
 Address: 5030 FREEMSBURG AVE, EASTON, PA 18045
 County: NORTHAMPTON Region: NORTHEAST

Administrator

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

Legal Entity

Name: THE BIRCHES OF LEHIGH OPCO LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-1 Date: 03/08/2024 Issued By: Township of Bethlehem

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 144 Waking Staff: 108

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint, Incident Exit Conference Date: 04/17/2025

Inspection Dates and Department Representative

04/17/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 130 Residents Served: 90

Secured Dementia Care Unit
 In Home: Yes Area: n/a Capacity: 57 Residents Served: 43

Hospice
 Current Residents: 4

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 90
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 54 Have Physical Disability: 0

Inspections / Reviews

04/17/2025 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 05/10/2025

05/12/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 05/07/2025
 Reviewer: [REDACTED] Follow-Up Type: Bypass Document Submission

Inspections / Reviews *(continued)*

09/03/2025 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/12/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

54a Direct Care Staff

1. Requirements

2600.

54.a. Direct care staff persons shall have the following qualifications:

3. Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care services with reasonable skill and safety.

Description of Violation

On [REDACTED] at approximately 6:30 p.m. staff person A was found unresponsive on the floor in front of the elevator on the first floor of the home. After 911 was called police arrived on the scene and were able to determine that staff person A had consumed a [REDACTED] gummy during their shift and that the [REDACTED] gummy was given to staff person A by staff person B. Staff person C wrote a statement indicating they witnessed staff persons A and B consuming two gummies each at around 4:00 p.m. and staff person C admitted to also having eaten one gummy around the same time. On [REDACTED] at approximately 6:30 p.m. staff person A had become unfit for duty and unable to provide necessary care to residents with reasonable skill and safety.

Plan of Correction

Directed ([REDACTED] - 05/07/2025)

Violation: 2600.54a- Direct care staff persons shall have the following qualifications: Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care services with reasonable skill and safety.

Immediate action taken:

On 4/13/2025, upon discovery of an employee being unresponsive, 911 was immediately called by staff on duty. The Executive Director was also immediately called by the staff on duty and arrived within 15 minutes of the call. The Bethlehem Township police and EMS arrived. The involved employee was transported by EMS to St. Luke's Andersen for evaluation and any necessary treatment. The employee responsible for bringing in gummies laced with THC and distributing them to two staff members was arrested by the police who responded to the 911 call and removed from the facility immediately. The third employee involved was also immediately terminated.

Staff coverage was secured immediately by the Executive Director, Wellness Nurse and the Lead Supervisor and at no time were residents without care.

A thorough internal investigation was conducted by leadership between 4/13/2025-4/15/2025, by the Executive Director and Regional Director of Operations to identify any policy or procedural gaps.

All staff members involved were immediately terminated and blocked from future employment with The Birches of Lehigh Valley.

Further immediate action:

On 4/16/25 the Executive Director and BOM re-educated all staff at the Birches on the zero-tolerance drug use and alcohol policy. This policy will continue to be enforced by the Executive Director. The BOM will review the drug and alcohol policy with new hires during orientation and the policy will be reviewed as needed, with strict enforcement by the Executive Director.

Ongoing action:

All department heads are conducting frequent, unannounced rounds to monitor staff behaviors and ensure compliance with the drug and alcohol policy, effective 4/14/2025.

54a Direct Care Staff (continued)*Additional action:*

To prevent future incidents of this nature, any suspicious activity will be immediately addressed with reasonable suspicion drug testing, disciplinary actions and mandatory reporting to the appropriate authorities and will be monitored by the Executive Director. Ongoing compliance, review of policy, and findings of ongoing rounds will be reviewed at the quarterly QA meeting on 7/14/2025.

Proposed Overall Completion Date: 05/07/2025

(Directed)***In addition to the above plan of correction:***

The home will have all department heads or designee conducting weekly unannounced rounds for 3 months to monitor staff behaviors and ensure compliance with the drug and alcohol policy. The weekly checks will be documented with date and time, the person completing the checks, any concerning behaviors that are identified, and disciplinary action taken.

Directed Completion Date: 06/06/2025

Implemented (█) - 08/28/2025