

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

December 30, 2025

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

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

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/15/2025 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: *02/13/2026*
 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: *146* Waking Staff: *110*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *10/15/2025*

Inspection Dates and Department Representative

10/15/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *130* Residents Served: *95*

Secured Dementia Care Unit
 In Home: *Yes* Area: *Daybreak* Capacity: *57* Residents Served: *41*

Hospice
 Current Residents: *13*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *95*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *51* Have Physical Disability: *0*

Inspections / Reviews

10/15/2025 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *11/15/2025*

12/03/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *12/05/2025*
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *12/05/2025*

Inspections / Reviews (*continued*)

12/30/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/05/2025

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

25b - Contract Signatures

1. Requirements

2600.

25.b. The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

Description of Violation

The resident-home contract, dated [REDACTED], for Resident #1 was not signed by the resident or payor.

Plan of Correction

Accept ([REDACTED] - 12/03/2025)

Violation 2600.56.b- The resident-home contract, dated [REDACTED] for Resident #1 was not signed by the resident or payor.

Immediate Corrective Actions: The Executive Director reviewed the agreement with Resident #1 on [REDACTED] and the signed contract was uploaded to [REDACTED] chart on 10/15/25.

Additional Corrective Actions: Executive Director was educated by [REDACTED] on 10/16/25 that all residents will be offered the opportunity to review and sign their agreement. If they refuse or are unable, that will be noted on the signature lines. Executive Director will complete an audit of all current resident agreements by 11/30/25, to ensure they are signed and uploaded.

Ongoing Quality Assurance Actions: The Executive Director will review the residency agreement for signatures and date prior to uploading into Tabula Pro, beginning 10/16/25. All printed residency agreements will be uploaded on the day of admission by the Executive Director or designated person, beginning 10/16/2025. Executive Director or designated person will review 5% of resident records each month, including a review of resident agreements to ensure they are signed. Ongoing compliance and findings will be reviewed at the quarterly QA meetings, beginning on 1/14/2026, with a review of Q4 2025 (October, November, and December).

Licensee's Proposed Overall Completion Date: 11/14/2025

Implemented ([REDACTED] - 12/30/2025)