

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

December 29, 2025

[REDACTED], ADMINISTRATOR  
ALEXANDRIA MANOR OF ALLENTOWN, INC.  
[REDACTED]

RE: ALEXANDRIA MANOR OF  
ALLENTOWN - BETHLEHEM  
CAMPUS  
3534 LINDEN STREET  
BETHLEHEM, PA, 18017  
LICENSE/COC#: 21456

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/19/2025 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: ALEXANDRIA MANOR OF ALLENTOWN - BETHLEHEM CAMPUS License #: 21456 License Expiration: 09/29/2026

Address: 3534 LINDEN STREET, BETHLEHEM, PA 18017

County: NORTHAMPTON Region: NORTHEAST

## Administrator

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

## Legal Entity

Name: ALEXANDRIA MANOR OF ALLENTOWN, INC.

Address: [REDACTED]

Phone: [REDACTED] Email: [REDACTED]

## Certificate(s) of Occupancy

Type: C-2 LP

Date: 04/04/2006

Issued By: L&I

## Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 41

Waking Staff: 31

## Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Complaint

Exit Conference Date: 11/19/2025

## Inspection Dates and Department Representative

11/19/2025 - On-Site: [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

License Capacity: 58

Residents Served: 40

## Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

## Hospice

Current Residents: 2

## Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 40

Diagnosed with Mental Illness: 4

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 1

Have Physical Disability: 1

## Inspections / Reviews

11/19/2025 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 12/18/2025

Inspections / Reviews (*continued*)

12/23/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/26/2025

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 12/28/2025

12/29/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/26/2025

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 16c - Written Incident Report

## 1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

## Description of Violation

Staff member B discovered resident #1 crying on the morning of 11/4/25. Resident #1 reported staff member A was verbally abusive and verbally inappropriate making the resident feel uncomfortable while transferring the resident to bed. A reportable incident was not sent to the department regarding the incident.

## Plan of Correction

Accept (█ - 12/23/2025)

Upon notification on 11/19/2025 I, █ Personal Care Home administrator sent a reportable incident to DHS and to OAPS.

Immediately post exit conference on 11/19/2025, audits were done with Admin █ and assistant to admin/designee in regard to what is considered an incident and if any have occurred and weren't reported, all found to be in compliance.

Admin █ was counseled and received education by █ owner of Alexandria Manor and █, personal care home administrator on 11/20/2025 in regard to 16c Written Incident Report and the importance of reporting any incidents to DHS in a timely fashion along with what is a reportable incidents and explaining policy regarding reports so they may be properly reported to DHS.

I, █ Personal Care Home administrator, started audits as of 11/20/25, randomly checking shift reports three times weekly, along with doing audits with staff for any type of incident that would warrant a reportable incident. Shift report audits will continue three times weekly for 8 weeks. Audits will be reviewed by myself █ and action taken if any findings are identified. █ personal care home administrator, is responsible for full ongoing compliance

Licensee's Proposed Overall Completion Date: 12/22/2025

Implemented (█ - 12/29/2025)

## 42c - Treatment of Residents

## 2. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

## Description of Violation

On 11/3/25 staff person A engaged in verbally abrasive and inappropriate language towards resident #1 while transferring the resident to bed. Resident #1 reported staff person A raised their voice and indicated residents in wheelchairs are faking their injuries. Resident #1 reported the event to the administrator the morning of 11/4/25.

## Plan of Correction

Accept (█ - 12/23/2025)

Upon notification on 11/19/2025 during inspection I, █ Personal Care Home administrator and █ Personal Care Home administrator, called and spoke with staff member A. I proceeded to question staff member A regarding what was brought to my attention during inspection. At the conclusion of conversation, I

**42c - Treatment of Residents (continued)**

explained to staff member A [REDACTED] behavior was inappropriate, and [REDACTED] no longer has a position with Alexandria Manor Bethlehem.

Staff Member B was counseled and received education by [REDACTED] owner of Alexandria Manor and [REDACTED] [REDACTED] personal care home administrator on 11/20/2025 in regard to regulation 42c, treating residents with dignity and respect, along with proper communication.

All staff will have received education by 12/30/2025 by [REDACTED], personal care home administrator in regard to regulation 42c, treating residents with dignity and respect, along with proper communication.

I, [REDACTED] Personal Care Home administrator, have started completing random audits weekly times 8 weeks with residents and staff to follow up and maintain regulation 42c and proper communication among staff and residents started on 11/21/2025.

Audits will be reviewed by myself [REDACTED] and action taken if any findings are identified. [REDACTED] personal care home administrator, is responsible for full ongoing compliance.

Licensee's Proposed Overall Completion Date: 12/22/2025

Implemented ([REDACTED] - 12/29/2025)

**65d - Initial Direct Care Training****3. Requirements**

2600.

65.d. Direct care staff persons hired after April 24, 2006, may not provide unsupervised ADL services until completion of the following:

2. Successful completion and passing the Department-approved direct care training course and passing of the competency test.

**Description of Violation**

Direct care staff person A, hired on [REDACTED] began providing unsupervised ADL services on [REDACTED] However, the home did not have a certificate that staff person A completed and passed the Department-approved direct care training course pass the competency test. The staff members file contained a direct care staff training certificate that was for different person.

**Plan of Correction**

Accept ([REDACTED] - 12/23/2025)

Immediately post exit conference on 11/19/2025, audits were done with Admin [REDACTED] and assistant to admin/designee of all employee charts that are MedTech/PCAs in regard to 65d - Initial Direct Care Training. Spreadsheet can be provided.

Office staff were counseled and received education by [REDACTED] owner of Alexandria Manor and [REDACTED] [REDACTED], personal care home administrator, on 11/20/2025 in regard to regulation 65d Initial Direct Care Training and the importance of having this completed before start date.

I, [REDACTED] Personal Care Home administrator, started audits as of 11/20/25, regarding any new hires and initial direct care training certificate completion date before starting date.

Audits will be reviewed by myself [REDACTED] and action taken if any findings are identified. [REDACTED] personal care home administrator, is responsible for full ongoing compliance

65d - Initial Direct Care Training (*continued*)

Licensee's Proposed Overall Completion Date: 12/22/2025

Implemented (█ - 12/29/2025)