

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

March 5, 2026

[REDACTED]
ALEXANDRIA MANOR OF ALLENTOWN INC
[REDACTED]

RE: ALEXANDRIA MANOR
7 SOUTH NEW STREET
NAZARETH, PA, 18064
LICENSE/COC#: 21064

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/25/2025, 12/15/2025 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: ALEXANDRIA MANOR **License #:** 21064 **License Expiration:** 03/24/2026
Address: 7 SOUTH NEW STREET, NAZARETH, PA 18064
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:** 05/17/1994 **Issued By:** L&I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 88 **Waking Staff:** 66

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident, Interim **Exit Conference Date:** 12/15/2025

Inspection Dates and Department Representative

11/25/2025 On Site: [REDACTED]
 12/15/2025 Off Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 93 **Residents Served:** 72

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:** 72
Diagnosed with Mental Illness: 4 **Diagnosed with Intellectual Disability:** 2
Have Mobility Need: 16 **Have Physical Disability:** 0

Inspections / Reviews

11/25/2025 - Partial

Lead Inspector: [REDACTED] **Follow Up Type:** POC Submission **Follow Up Date:** 12/28/2025

Inspections / Reviews *(continued)*

12/29/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/02/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 01/03/2026

03/05/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/02/2026

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

Resident [REDACTED] support plan dated [REDACTED] indicates the resident has exit seeking behaviors and requires supervision to ensure they do not exit the facility alone. On [REDACTED] at approximately 6:00 a.m. resident [REDACTED] could not be located in the building and police were called. The resident was found by staff at a nearby high school before police could respond to the home. The incident was not reported to the department's regional office.

Plan of Correction

Accepted [REDACTED] - 12/29/2025)

The Administrator, [REDACTED] and the Assistant Administrator, [REDACTED] are responsible to immediately report and comply with the guidelines written in Regulations 16b-f, including abuse reporting 15a-d. Both [REDACTED] and [REDACTED] re-educated themselves in Regulations 15a-d and 16b-f on 11/6/2025. Both [REDACTED] and [REDACTED] attended The Quality Management Meeting on 12/19/2025 at 10am where we discussed and implemented a Mandatory Elopement Drill to be implemented as of 12/29/2025 and effective every 6 months thereafter. A Mandatory Elopement Risk/Drill Class has been scheduled for all staff, January 7, 2026 at 9am & 4pm, to discuss the implementation of elopement drills, and risk assessments with emphasis on the results from Elopement Drill covertly scheduled for 12/29/2025. Also implemented is an Elopement Risk Assessment, effective immediately and implemented as of 12/22/2025 to be done on all current Residents by January 2, 2026, upon admission of new Residents, every 6 months thereafter, and immediately if a Resident demonstrates exit-seeking behavior. Starting, Monday, December 8, 2025, The Administrator, [REDACTED] and/or Assistant Administrator, [REDACTED] began conducting resident interviews weekly x 4, bi-weekly x 4, then monthly thereafter, to ensure operations related to Regulations 16b-f and 15 a-d are in accordance with reporting guidelines. [REDACTED] and [REDACTED] also meet daily via in person or by phone to discuss any and all incidents that may require follow-up action. Re-education Documentation attached [REDACTED] Administrator

Licensee's Proposed Overall Completion Date: 01/07/2026

Implemented [REDACTED] 03/05/2026)

23a - Activities of Daily Living Assistance

2. Requirements

2600.

23.a. A home shall provide each resident with assistance with ADLs as indicated in the resident's assessment and support plan.

Description of Violation

Resident [REDACTED]'s support plan dated [REDACTED] indicates the resident has exit seeking behaviors and requires supervision to ensure they do not exit the facility alone. On [REDACTED] at approximately 6:00 a.m. resident [REDACTED] could not be located in the building and police were called. The resident was found by staff at a nearby high school before police could respond to the home. Also, on [REDACTED] the resident exited the home and was found in an adjacent alley way and on [REDACTED] at 9:45 a.m. the resident was seen walking on the street in front of the home without shoes.

Plan of Correction

Accepted [REDACTED] 12/29/2025)

All staff and management are responsible to ensure all residents receive services properly documented in the residents assessment and support plan. Resident [REDACTED] is on a 15-minute check during waking hours and receiving

23a Activities of Daily Living Assistance (continued)

1:1 care during overnight hours paid by the facility until alternate placement has been located and/or the expiration of 30 day notice given to family via email and certified mail on 12/22/2025. Upon expiration of current 30 day notice, a new 30 day notice will be issued and 1:1 care financial obligation will be designated to Resident #1's POA/Designee until alternate placement has been found. Both [REDACTED] and [REDACTED] attended The Quality Management Meeting on 12/19/2025 at 10am where we discussed and implemented a Mandatory Elopement Drill to be implemented as of 12/29/2025 and effective every 6 months thereafter. A Mandatory Elopement Risk/Drill Class has been scheduled for all staff, January 7, 2026 at 9am & 4pm, to discuss the implementation of elopement drills, and risk assessments with emphasis on the results from Elopement Drill covertly scheduled for 12/29/2025. Also implemented is an Elopement Risk Assessment, effective immediately and implemented as of 12/22/2025 to be done on all current Residents by January 2, 2026, upon admission of new Residents, every 6 months thereafter, and immediately if a Resident demonstrates exit seeking behavior. Starting, Monday, December 8, 2025, The Administrator, [REDACTED] and/or Assistant Administrator, [REDACTED] began conducting resident interviews weekly x 4, bi weekly x 4, then monthly thereafter, to ensure operations related to Regulations 16b f and 15 a d are in accordance with reporting guidelines. [REDACTED] and [REDACTED] also meet daily via in person or by phone to discuss any and all incidents that may require follow up action. 1:1 Schedule (Highlighted in purple; Elopement Drill Form; Class posting; and Risk Assessment documentation attached. [REDACTED] Administrator.

Licensee's Proposed Overall Completion Date: 01/07/2026

Implemented [REDACTED] - 03/05/2026)

42b - Abuse**3. Requirements**

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

Resident [REDACTED] support plan dated [REDACTED] indicates the resident has exit seeking behaviors and requires supervision to ensure they do not exit the facility alone. On [REDACTED] at approximately 1:45 a.m. resident [REDACTED] could not be located in the home. With the assistance of the police and fire departments, resident [REDACTED] was found at approximately 6:00 a.m. at a nearby cement factory. The resident was transported to the hospital for evaluation and was diagnosed with a right first rib fracture as a result of a fall that occurred during the elopement. Resident [REDACTED] had a documented history of exit seeking behaviors and elopements from the home prior to the [REDACTED] incident.

Repeat violation [REDACTED]

Plan of Correction

Accepted [REDACTED] - 12/29/2025)

The Administrator, [REDACTED] Assistant Administrator, [REDACTED] and all staff are responsible to ensure all residents are not neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment, or disciplined in any way. Resident [REDACTED] is on a 15 minute check during waking hours and 1:1 care during overnight paid by the facility until alternate placement has been located and/or the expiration of 30 day notice given to family via email and certified mail on 12/22/2025. Upon expiration of current 30 day notice, a new 30 day notice will be issued and 1:1 care financial obligation will be designated to Resident [REDACTED] POA/Designee until alternate placement has been found. Both [REDACTED] and [REDACTED] attended The Quality Management Meeting on 12/19/2025 at 10am where we discussed and implemented a Mandatory Elopement Drill to be implemented as of 12/29/2025 and effective every 6 months thereafter. A Mandatory Elopement Risk/Drill Class has been scheduled for all staff, January 7, 2026 at 9am & 4pm, to discuss the implementation of elopement drills, and risk assessments with

42b - Abuse (continued)

emphasis on the results from Elopement Drill covertly scheduled for 12/29/2025. Also implemented is an Elopement Risk Assessment, effective immediately and implemented as of 12/22/2025 to be done on all current Residents by January 2, 2026, upon admission of new Residents, every 6 months thereafter, and immediately if a Resident demonstrates exit-seeking behavior. The Administrator, [REDACTED] and/or Assistant Administrator, [REDACTED] began conducting resident interviews weekly x 4, bi-weekly x 4, then monthly thereafter, to ensure operations related to Regulations 16b-f and 15 a-d are in accordance with reporting guidelines. [REDACTED] and [REDACTED] also meet daily via in person or by phone to discuss any and all incidents that may require follow-up action. 1:1 Schedule (Highlighted in purple); Elopement Drill Form; Class Posting; Risk Assessment; Resident Interviews; and 30-Day notice documentation attached [REDACTED] Administrator.

Licensee's Proposed Overall Completion Date: 01/07/2026

Implemented [REDACTED] - 03/05/2026)