

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

September 24, 2026

[REDACTED]
PARKLAND MANOR LLC
[REDACTED]
[REDACTED]

RE: PARKLAND MANOR
4636 CRACKERSPORT ROAD
ALLENTOWN, PA, 18104
LICENSE/COC#: 22823

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/29/2026 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: PARKLAND MANOR

License #: 22823

License Expiration: 10/09/2026

Address: 4636 CRACKERSPORT ROAD, ALLENTOWN, PA 18104

County: LEHIGH

Region: NORTHEAST

Administrator

Name:

Phone:

Email:

Legal Entity

Name: PARKLAND MANOR LLC

Address:

Phone:

Email:

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 86

Waking Staff: 65

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Complaint

Exit Conference Date: 07/29/2026

Inspection Dates and Department Representative

07/29/2026 - On-Site:

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 80

Residents Served: 49

Secured Dementia Care Unit

In Home: Yes

Area: SDCU

Capacity: 40

Residents Served: 24

Hospice

Current Residents: 13

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 49

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 37

Have Physical Disability: 0

Inspections / Reviews

07/29/2026 Partial

Lead Inspector:

Follow-Up Type: POC Submission

Follow-Up Date: 08/29/2026

09/09/2026 - POC Submission

Submitted By:

Date Submitted: 09/10/2026

Reviewer:

Follow-Up Type: Document Submission Follow-Up Date: 09/11/2026

Inspections / Reviews (*continued*)

09/24/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/10/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

89a - Water Pressure**1. Requirements**

2600.

89.a. The home must have hot and cold water under pressure in each bathroom, kitchen and laundry area to accommodate the needs of the residents in the home.

Description of Violation

Resident interviews indicate the water does not stay hot long enough to get a shower, it gets cold by the end of the shower.

Plan of Correction**Accept** [REDACTED] - 09/09/2026)

Immediate action was taken and all sinks and showers were inspected by maintenance on 8/1/26. All screens inside sink faucet and shower head were cleaned in all rooms. Maintenance then ran the showers in the resident units for a full 10-15 minutes to verify that the water temperature remained warm and consistent throughout that timeframe.

Going forward to ensure continued compliance, maintenance will be responsible for checking all resident rooms on a weekly basis and will sign off on a log sheet that all rooms have been checked. This procedure began on 8/5/26 and will continue weekly through the last week of September. Maintenance will alternate log testing hours weekly (e.g., testing at 7:00 AM peak shower hours one week, and 4:00 PM the next) to verify system capacity under high demand. If there are any rooms with a problem of maintaining hot water, maintenance will immediately report it to the Administrator. The Administrator will then contact a plumber for a service call to see what could be causing the issue besides any sediment getting onto the screens of the faucets preventing a consistent flow of water through the faucets. It will be the responsibility of the Administrator to ensure that weekly checks are being completed and ongoing continued compliance with regulation 2600.89a. (please see attached maintenance log)

Licensee's Proposed Overall Completion Date: 09/30/2026

Implemented [REDACTED] - 09/24/2026)**102h - Toilet Paper****2. Requirements**

2600.

102.h. Toilet paper shall be provided for every toilet.

Description of Violation

Resident [REDACTED] was not given toilet paper because the resident was clogging the toilet and stuffing it in their adult brief.

Plan of Correction**Accept** [REDACTED] - 09/09/2026)

Immediate action was taken and resident # [REDACTED] was given one roll of toilet paper by Nursing to prevent from using excess usage. This action was put into place prior to the inspection and continues to remain in effect. Housekeeping is aware that Resident [REDACTED] is to always have one extra roll of toilet paper at all times. Resident [REDACTED] has also begun using panty liners in [REDACTED] underwear which has eliminated the behavior of [REDACTED] using excess toilet paper and stuffing it in [REDACTED] brief because they were afraid of having an accident and it going through their brief. If this behavior were to occur again, staff is aware to notify Administration immediately. Administration along with the resident, POA and PCP will then work together to determine a solution which ay resolve the behavior and provide the resident comfort and peace of mind. In addition, Maintenance will the install a high flush toilet in the resident's room to help prevent any future clogging of the toilet.

To ensure continued compliance with regulation 2600.102h, a complete audit of all resident rooms was conducted on 8/3/26 in which the Administrator checked to ensure all rooms had toilet paper on the roll as well as an

102h Toilet Paper (continued)

additional roll in the rooms. In addition, the Administrator or a designee appointed by the Administrator will conduct unannounced weekly audits for the next 8 weeks with a completion date of the week of 9/27/26 of all resident's room to ensure toilet paper remains fully supplied in each room. It will remain the responsibility of the Administrator to ensure that Housekeeping is continuing to supply all residents with an adequate amount of toilet paper in all resident rooms. (Please see attached weekly audit)

Licensee's Proposed Overall Completion Date: 09/30/2026

Implemented  - 09/24/2026)