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

October 14, 2026

[redacted]
MORNINGSTAR SENIOR LIVING INC
[redacted]

RE: MORAVIAN HALL SQUARE
PERSONAL CARE RESIDENCES
175 WEST NORTH STREET
NAZARETH, PA, 18064
LICENSE/COC#: 22628

[redacted],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/16/2026 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]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: *MORAVIAN HALL SQUARE PERSONAL CARE RESIDENCES* **License #**: *22628* **License Expiration**: *03/22/2027*

Address: *175 WEST NORTH STREET, NAZARETH, PA 18064*

County: *NORTHAMPTON* **Region**: *NORTHEAST*

Administrator

Name: [redacted] **Phone**: [redacted] **Email**: [redacted]

Legal Entity

Name: *MORNINGSTAR SENIOR LIVING INC*

Address: [redacted]

Phone: [redacted] **Email**: [redacted]

Certificate(s) of Occupancy

Type: *I-2* **Date**: *05/25/2004* **Issued By**: *Nazareth Borough*

Type: *C-2 LP* **Date**: *05/25/2004* **Issued By**: *L&I*

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff**: *107* **Waking Staff**: *80*

Inspection Information

Type: *Partial* **Notice**: *Unannounced* **BHA Docket #**:

Reason: *Incident* **Exit Conference Date**: *09/18/2026*

Inspection Dates and Department Representative

09/16/2026 - On-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *104* **Residents Served**: *74*

Secured Dementia Care Unit

In Home: *Yes* **Area**: *Galilee* **Capacity**: *25* **Residents Served**: *20*

Hospice

Current Residents: *4*

Number of Residents Who:

Receive Supplemental Security Income: *0* **Are 60 Years of Age or Older**: *74*

Diagnosed with Mental Illness: *0* **Diagnosed with Intellectual Disability**: *0*

Have Mobility Need: *33* **Have Physical Disability**: *0*

Inspections / Reviews

09/16/2026 Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *10/16/2026*

Inspections / Reviews *(continued)*

10/14/2026 POC Submission

Submitted By: [redacted]

Date Submitted: *10/14/2026*

Reviewer: [redacted]

Follow Up Type: *Bypass Document Submission*

10/14/2026 Bypass Document Submission

Submitted By: [redacted]

Date Submitted: *10/14/2026*

Reviewer: [redacted]

Follow Up Type: *Not Required*

42b - Abuse

1. 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

On [redacted], Staff person A and Staff person B entered Resident [redacted] room for morning care. Resident [redacted] was sitting on the edge of the bed. Both staff persons assisted the resident to the bathroom and set Resident [redacted] on the toilet. Then, they assisted the resident with removing their clothes. Before Staff person B could finish care, Resident [redacted] began grabbing, kicking, and slapping at both staff. Staff person A grabbed residents' wrists to restrain resident from hitting either staff person. Later that day, bruises were noted on both of the residents' wrists. Staff person A admitted to grabbing the residents' wrists to allow staff person B the opportunity to finish assisting the resident to get dressed.

Plan of Correction ***Accept [redacted] - 10/14/2026)***

Upon discovery an investigation was initiated and notification was made to the Elder Abuse Hotline. Local law enforcement was contacted and Staff Person A was subsequently terminated. Staff education on Behavior Management and Resident Rights including Abuse Prevention was provided on 9/11/2026 and 9/14/2026 by the PCHA and Personal Care Clinical Leader. Additional education on Abuse Prevention was added 9/17/2026 to the annual training plan for all staff. PCHA or designee will conduct weekly rounds to observe staff to resident conduct starting 9/16/2026 to monitor for negative interaction. Findings will be reported at QAPI by the PCHA or designee.

Licensee's Proposed Overall Completion Date: *10/16/2026*

Implemented [redacted] - 10/14/2026)

202 - Prohibitions

2. Requirements

2600.
202. The following procedures are prohibited:
6. A manual restraint, define[redacted]as a hands-on physical means that restricts, immobilizes or reduces a resident's ability to move [redacted] arms, legs, head or other body parts freely, is prohibited. A manual restraint does not include prompti[redacted] escorting or guiding a resident to assist in the ADLs or IADLs.

Description of Violation

On [redacted] at 10:35 a.m. staff person A and staff person B were providing care to resident [redacted]. Resident [redacted] became combative and staff person A grabbed resident [redacted] wrists and held onto them, restricting the resident's movement while staff person B dressed the resident.

Plan of Correction ***Accept [redacted] - 10/14/2026)***

Upon discovery an investigation was initiated and notification was made to the Elder Abuse Hotline. Local law enforcement was contacted and Staff Person A was subsequently terminated. Staff education on Behavior Management and Resident Rights including Abuse Prevention was provided on 9/11/2026 and 9/14/2026 by the PCHA and Personal Care Clinical Leader. Additional education on Abuse Prevention was added 9/17/2026 to the annual training plan for all staff. PCHA or designee will conduct weekly rounds to observe staff to resident conduct starting 9/16/2026 to monitor for negative interaction. Findings will be reported at QAPI by the PCHA or designee.

Licensee's Proposed Overall Completion Date: *10/16/2026*

Implemented [redacted] - 10/14/2026)