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

October 19, 2026

[redacted]
1680 SPRING CREEK ROAD OPERATIONS LLC
[redacted]

RE: LEHIGH COMMONS
1680 SPRING CREEK ROAD
MACUNGIE, PA, 18062
LICENSE/COC#: 22205

[redacted],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/22/2026 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: *LEHIGH COMMONS* **License #**: *22205* **License Expiration**: *03/16/2027*

Address: *1680 SPRING CREEK ROAD, MACUNGIE, PA 18062*

County: *LEHIGH* **Region**: *NORTHEAST*

Administrator

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

Legal Entity

Name: *1680 SPRING CREEK ROAD OPERATIONS LLC*

Address: [redacted]

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

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *18* **Total Daily Staff**: *109* **Waking Staff**: *82*

Inspection Information

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

Reason: *Complaint* **Exit Conference Date**: *09/23/2026*

Inspection Dates and Department Representative

09/22/2026 - On-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *80* **Residents Served**: *73*

Secured Dementia Care Unit

In Home: *Yes* **Area**: *1st Floor* **Capacity**: *14* **Residents Served**: *13*

Hospice

Current Residents: *9*

Number of Residents Who:

Receive Supplemental Security Income: *0* **Are 60 Years of Age or Older**: *73*

Diagnosed with Mental Illness: *2* **Diagnosed with Intellectual Disability**: *0*

Have Mobility Need: *18* **Have Physical Disability**: *0*

Inspections / Reviews

09/22/2026 Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *10/04/2026*

10/05/2026 - POC Submission

Submitted By: [redacted] **Date Submitted**: *10/16/2026*

Reviewer: [redacted] **Follow-Up Type**: *Document Submission* **Follow-Up Date**: *10/16/2026*

Inspections / Reviews *(continued)*

10/19/2026 Document Submission

Submitted By: [redacted] **Date Submitted:** *10/16/2026*

Reviewer: [redacted] **Follow Up Type:** *Not Required*

185a - Implement Storage Procedures

1. Requirements

2600.
185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

On [redacted] at 2:30 pm Room [redacted] did not contain safe storage of 3 Oxygen tanks lying on the floor in the room.

Plan of Correction ***Accept [redacted] - 10/05/2026)***

On 9/22/26, Administrator had oxygen tanks stored correctly.
By 10/16/26, Administrator will in-service all Direct Care staff on 2600.185a especially related to oxygen tank safe storage.
By 10/9/26, Administrator will educate residents that independently use oxygen on the safe storage of Oxygen tanks.
To ensure ongoing compliance, Administrator or designee will conduct weekly audits on resident rooms that use oxygen for 2 months starting week of 10/5/26.
Administrator will add 2600.185a to the monthly Quality Assurance meeting starting October 2026 and ongoing for next year.

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

Implemented [redacted] 10/19/2026)