

Department of Human Services
Bureau of Human Service Licensing

May 27, 2021

[REDACTED], EXECUTIVE DIRECTOR
MORAVIAN VILLAGE OF BETHLEHEM
526 WOOD STREET
BETHLEHEM, PA 18018

RE: MORAVIAN VILLAGE II OF
BETHLEHEM
526 WOOD STREET
BETHLEHEM, PA, 18018
LICENSE/COCC#: 21569

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/05/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Michele Moskalczyk
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: MORAVIAN VILLAGE II OF BETHLEHEM **License #:** 21569 **License Expiration Date:** 08/03/2021
Address: 526 WOOD STREET, BETHLEHEM, PA 18018
County: NORTHAMPTON **Region:** NORTHEAST

Administrator

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

Legal Entity

Name: MORAVIAN VILLAGE OF BETHLEHEM
Address: 526 WOOD STREET, BETHLEHEM, PA, 18018
Phone: 6106254885 **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 12/13/2004 **Issued By:** L&I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 12 **Waking Staff:** 9

Inspection

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 04/05/2021

Inspection Dates and Department Representative

04/05/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 250 **Residents Served:** 11

Secured Dementia Care Unit

In Home: No **Area:** **Capacity:** **Residents Served:**

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 11
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 1 **Have Physical Disability:** 0

Inspections / Reviews

04/05/2021 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *05/15/2021*

5/26/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *06/02/2021*

5/27/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

15a - Resident Abuse Report

1. Requirements

2600.

- 15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

On 3/21/21 the home received a complaint from resident #1's family member stating that staff person A was disrespectful towards resident #1 and resident #1 did not want staff person A providing care to [REDACTED] anymore. The home did not notify the area agency on aging of the complaint of possible abusive behavior.

Plan of Correction

Accept

Northampton County Area Agency on Aging was contacted on 4/5/2021 and a report was given and filed with [REDACTED]. No further information was requested.

PC Administrator/Designee will contact Area Agency on Aging of any possible abuse complaints moving forward. PC administrator/designee will monitor and assure ongoing compliance via audit sheet of any future Reportables which include checking if a referral needs to be placed with NCAAA depending on nature of Reportable submitted.

Completion Date: 04/05/2021

Document Submission

Implemented

NCAAA was contacted on 4/5/2021 and report filed. No further information requested. PC Administrator/designee will complete audit sheet for future Reportables through DHS which will include checking if a referral is required to NCAAA depending on the nature of Reportable submitted.

42c - Treatment of Residents

1. Requirements

2600.

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

Description of Violation

It was determined through a complaint the home received on 3/21/21 and through resident interview that staff person A was disrespectful towards resident #1 on several occasions. Resident #1 stated that staff person A instructed [REDACTED] not to use [REDACTED] call bell so much and also told the resident that [REDACTED] can dress [REDACTED] when the resident asked for help getting [REDACTED] top on. Resident #1 suffers from vertigo and has concerns of falling. Resident #1 indicated that staff person A's behavior made [REDACTED] uneasy when staff person A came to provide care.

Plan of Correction

Accept

PC Administrator completed a thorough investigation upon receiving complaints from Resident 1/Family member on 3/22/2021. This included phone interview and face to face discussion with Resident 1 on 3/22/21, and completing and submitting required Reportable for DHS within 24 hours. Staff Member A was put on Administrative Leave effective [REDACTED] pending investigation. Investigation completed on 3/24/2021. Read and sign communication on Preventing Abuse had been reviewed and signed in March 2021 for all staff. Ongoing staff training regarding Resident Rights, Abuse and Customer Services will continue through 2021 by PC Administrator for continuing education. Resident Rights review for staff will be in May 2021 education Read and Sign, and reviewed annually. Resident Rights will be reviewed with all PC residents and their Responsible Parties during the month of May, 2021, and reviewed annually for clarification of their Resident Rights.

Audits will be completed by PC Administrator/Designee to assure ongoing compliance.

Completion Date: 05/31/2021

42c - Treatment of Residents (continued)

Update - 05/26/2021

Please send/Attach proof of staff training. 5-26-2021 - MM

Document Submission

Implemented

Resident Rights reviewed with all PC residents and their families on 5/15 and 5/16/2021. Resident Rights reviewed with all staff as part of the May 2021 education. Training attached to this submission.

227d - Support Plan Medical/Dental

1. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Resident #1's support plan dated [redacted] indicates that the resident ambulates independently and requires limited oral assistance for evacuating safely. Resident and staff interviews indicate the resident uses a rolling walker for ambulation and also requires a wheel chair for transport of longer distances, such as evacuating or getting to the dining area, due to vertigo and dizziness issues that have caused falls. Resident #1's support plan was not updated to reflect [redacted] current ambulation and mobility needs.

Plan of Correction

Accept

Resident 1's support plan was updated to reflect [redacted] current ambulation and mobility needs on 4/5/2021. Audits of support plans ambulatory/mobility needs or significant changes in condition will be conducted monthly of all PC residents to ensure mobility needs are current and communicated with staff. PC Administrator/Designee shall monitor and assure ongoing compliance.

Completion Date: 04/05/2021

Document Submission

Implemented

Resident 1's support plan updated to reflect current ambulation and mobility needs on 4/5/21. Monthly audits of support plans for ambulatory/mobility needs or significant changes in condition will be conducted by PC Admin/Designee and changes communicated with staff for ongoing compliance.