pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to **SERENITY CARE MID VALLEY LLC**
LEGAL ENTITY

To operate **SERENITY CARE MID VALLEY**
NAME OF FACILITY OR AGENCY

Located at **65 STURGES ROAD, PECKVILLE, PA 18452**
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE/SERVICE LOCATION

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To provide **Personal Care Homes**
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed **90**
(MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: **Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 22**

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from **November 5, 2024** until **March 28, 2025**,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **230580**

ISSUING OFFICER

DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.

HS 628 – 04/23

pennsylvania
DEPARTMENT OF HUMAN SERVICES

Emailing Date: November 4, 2024

[redacted]
Serenity Care Mid Valley LLC
[redacted]

RE: Serenity Care Mid-Valley
65 Sturges Road
Peckville, Pennsylvania 18452
License #: 230580

Dear [redacted]

As the result of your home's recent request to adjust the use of the physical space, the Department has granted an approval for a revised license issued under the authority of 55 Pa. Code Ch. 2600 (relating to Personal Care Homes). The approved capacity revision request is a request to convert 22 beds to SDCU; total capacity remains at 90. The expiration date of the license remains unchanged.

Any future requests for changes in capacity should be forwarded to the Department for review and consideration in accordance with the applicable regulations. The revised license is enclosed.

Sincerely,

Juliet Marsala

Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosure
License

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

October 31, 2024

[redacted]
SERENITY CARE MID VALLEY LLC
[redacted]

RE: SERENITY CARE MID VALLEY
65 STURGES ROAD
PECKVILLE, PA, 18452
LICENSE/COC#: 23058

Dear [redacted],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/10/2024 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: *SERENITY CARE MID VALLEY* **License #**: *23058* **License Expiration**: *03/28/2025*

Address: *65 STURGES ROAD, PECKVILLE, PA 18452*

County: *LACKAWANNA* **Region**: *NORTHEAST*

Administrator

Name: [redacted]

[redacted]

[redacted] of Occupancy

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff**: *47* **Waking Staff**: *35*

Inspection Information

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

Reason: *Complaint, Interim* **Exit Conference Date**: *09/10/2024*

Inspection Dates and Department Representative

09/10/2024 - On-[redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *90* **Residents Served**: *40*

Secured Dementia Care Unit

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

Hospice

Current Residents: *1*

Number of Residents Who:

Receive Supplemental Security Income: *12* **Are 60 Years of Age or Older**: *37*

Diagnosed with Mental Illness: *1* **Diagnosed with Intellectual Disability**: *1*

Have Mobility Need: *7* **Have Physical Disability**: *1*

Inspections / Reviews

09/10/2024 - Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *10/11/2024*

10/22/2024 - POC Submission

Submitted By: [redacted] **Date Submitted**: *10/25/2024*

Reviewer: [redacted] **Follow-Up Type**: *Document Submission* **Follow-Up Date**: *10/24/2024*

Inspections / Reviews *(continued)*

10/31/2024 - Document Submission

Submitted By: [redacted] **Date Submitted**: *10/25/2024*

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

92 - Windows

1. Requirements

2600.
92. Windows and Screens - Windows, including windows in doors, must be in good repair and securely screened when doors or windows are open.

Description of Violation

All of the windows in the home are new. The screens are special order and have not been delivered yet.

Plan of Correction ***Accept [redacted] - 10/22/2024)***

Regulation 92 is important to ensure windows/screens are in good repair and secure.
The screens for the proposed unoccupied SCDU have been ordered thru Mesko Glass.
Administrator [redacted] will ensure that no residents will occupy a space/room without a securely screened window.
Monthly facility audits will be conducted by Administrator [redacted] /Maintenance Director [redacted] to monitor/ensure ongoing compliance.
See Attachment

Licensee's Proposed Overall Completion Date: *10/09/2024*

Update: *10/22/2024*

Reviewed work order for purchase of screens.
Please respond with an estimated time the screens will be put in place.

Evidence of Completion ***Implemented [redacted] - 10/31/2024)***

[redacted] from Mesko Glass provided an estimated installation date of 11/15/24. They are currently waiting on the clips for the screens.

126b - Furnace Cleaning

2. Requirements

2600.
126.b. Furnaces shall be cleaned according to the manufacturer's instructions. Documentation of the cleaning shall be kept.

Description of Violation

The home has no evidence of any annual furnace cleaning.

Plan of Correction ***Accept ([redacted] - 10/22/2024)***

Regulation 126b is important to ensure the safety of all residents/staff in the facility. Furnaces shall be cleaned according to the manufacturer's instructions.
The required annual cleaning was immediately scheduled and completed on 9-19-24.
Maintenance Director [redacted] to schedule and ensure annual service to furnace is completed.
Administrator Melanie Duggan to monitor/ensure ongoing compliance.

See Attachment

Licensee's Proposed Overall Completion Date: *10/09/2024*

Update: *10/22/2024*

Reviewed furnace cleaning

Evidence of Completion ***Implemented [redacted] - 10/31/2024)***

See attached.