

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

October 3, 2024

[REDACTED]  
MANOR CARE LINDEN VILLAGE OF LEBANON PA LLC  
[REDACTED]  
[REDACTED]

RE: LINDEN VILLAGE  
100 TUCK STREET  
LEBANON, PA, 17042  
LICENSE/COC#: 32427

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 09/27/2024 of the above facility, no regulatory citations have been identified as a result of this inspection.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,

[REDACTED]

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: *LINDEN VILLAGE* License #: *32427* License Expiration: *06/20/2025*  
 Address: *100 TUCK STREET, LEBANON, PA 17042*  
 County: *LEBANON* Region: *CENTRAL*

**Administrator**

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

**Legal Entity**

Name: *MANOR CARE LINDEN VILLAGE OF LEBANON PA LLC*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *10/01/1998* Issued By: *Labor & Industry*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *105* Waking Staff: *79*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Complaint, Incident* Exit Conference Date: *09/27/2024*

**Inspection Dates and Department Representative**

09/27/2024 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: *64* Residents Served: *57*  
 Secured Dementia Care Unit  
 In Home: *Yes* Area: *Stoy/Tabor/Mt Hope* Capacity: *48* Residents Served: *46*  
 Hospice  
 Current Residents: *9*  
 Number of Residents Who:  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *56*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *48* Have Physical Disability: *0*

**Inspections / Reviews**

09/27/2024 - Partial  
 Lead Inspector: [REDACTED] Follow-Up Type: *Not Required*

NO DEFICIENCIES FOUND