

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

April 18, 2025

[REDACTED]  
ELK HAVEN NURSING HOME ASSOCIATION INC  
[REDACTED]

RE: SILVER CREEK TERRACE  
791 JOHNSONBURG ROAD  
ST. MARYS, PA, 15857  
LICENSE/COC#: 42602

[REDACTED],  
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/20/2025 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: SILVER CREEK TERRACE License #: 42602 License Expiration: 06/20/2025  
 Address: 791 JOHNSONBURG ROAD, ST. MARYS, PA 15857  
 County: ELK Region: WESTERN

**Administrator**

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

**Legal Entity**

Name: ELK HAVEN NURSING HOME ASSOCIATION INC  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: C-2 LP Date: 07/09/1997 Issued By: Dept L & I

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 53 Waking Staff: 40

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #:  
 Reason: Incident Exit Conference Date: 02/20/2025

**Inspection Dates and Department Representative**

02/20/2025 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 80 Residents Served: 53  
 Secured Dementia Care Unit  
 In Home: No Area: Capacity: Residents Served:  
 Hospice  
 Current Residents: 1  
 Number of Residents Who:  
 Receive Supplemental Security Income: 2 Are 60 Years of Age or Older: 53  
 Diagnosed with Mental Illness: 6 Diagnosed with Intellectual Disability: 1  
 Have Mobility Need: 0 Have Physical Disability: 1

**Inspections / Reviews**

02/20/2025 Partial  
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 03/22/2025

03/19/2025 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: 04/15/2025  
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 03/26/2025

Inspections / Reviews *(continued)*

03/31/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/15/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 04/16/2025

04/18/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/15/2025

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 [REDACTED] at 9:15pm, staff person A went into resident [REDACTED] room to help [REDACTED] get ready for bed and asked [REDACTED] if [REDACTED] like to change into [REDACTED] pajamas. The resident said no, and staff person A asked the resident two more times. The resident continued to refuse, said [REDACTED] was fine, was ready for bed and to leave [REDACTED] alone. Staff person A left the room and told staff person B that resident [REDACTED] refused 3 times to change into [REDACTED] pajamas. Staff person B said no follow me, walked down to resident [REDACTED] bedroom, ripped the covers off [REDACTED] and started pulling [REDACTED] up to the edge of the bed. Resident [REDACTED] said to leave [REDACTED] alone, [REDACTED] was fine and refused again. Staff person B continued to remove the resident's clothing, even though the resident kept refusing. Resident [REDACTED] looked at staff person A, yelled and said get out of my room. Staff person B pulled resident [REDACTED]s pants and briefs down and the resident continued to refuse as staff person B changed the resident into [REDACTED] pajamas. Afterwards, staff person B told staff person A [REDACTED] needed to be more forceful with the residents. However, this incident was not reported to the local Area Agency on Aging until 2/13/25 at 12:17 p.m.

## Plan of Correction

Accept [REDACTED] - 03/31/2025)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken:

1. on 02/13/2025 by the Administrator to Suspend staff member B pending the outcome of the investigation.
2. on 02/13/2025 by the Administrator to Educate staff person A on abuse and reporting abuse.
3. on 02/13/2025 by the Administrator to Educate all staff on abuse and abuse reporting.

To enhance the currently compliant operations:

1. on 02/13/2025 the Administrator will Continue to educate staff on abuse and abuse reporting. In person abuse training with adult protective services scheduled for 05/07/2025.
2. on 02/13/2025 the Administrator will Move staff member A to day shift for additional orientation, with a completion date of 03/09/2025.
3. on 02/13/2025 the Administrator will additionally train Staff member B on Abuse and Abuse reporting, Dementia and Dementia care, as well as Supervisory skills, with a completion date of 02/24/2025.

The overall completion date is 05/07/2025.

Effective 02/13/2025 the Administrator or designee will perform random education with staff members through 12/31/2025 to maintain ongoing compliance with immediately reporting 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. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 04/16/2025

15a Resident Abuse Report (continued)

Implemented [redacted] - 04/18/2025)

16c Written Incident Report

2. Requirements

2600.

16.c. The home shall report the incident or condition to the Department’s personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On [redacted] at 9:15pm, staff person A went into resident [redacted] room to help [redacted] get ready for bed and asked [redacted] if [redacted] like to change into [redacted] pajamas. The resident said no, and staff person A asked the resident two more times. The resident continued to refuse, said [redacted] was fine, was ready for bed and to leave [redacted] alone. Staff person A left the room and told staff person B that resident [redacted] refused 3 times to change into [redacted] pajamas. Staff person B said no follow me, walked down to resident [redacted] bedroom, ripped the covers off [redacted] and started pulling [redacted] up to the edge of the bed. Resident [redacted] said to leave [redacted] alone, [redacted] was fine and refused again. Staff person B continued to remove the resident’s clothing, even though the resident kept refusing. Resident [redacted] looked at staff person A, yelled and said get out of my room. Staff person B pulled resident [redacted] pants and briefs down and the resident continued to refuse as staff person B changed the resident into [redacted] pajamas. Afterwards, staff person B told staff person A [redacted] needed to be more forceful with the residents. However, this incident was not reported to the Department until [redacted] at 3:05 p.m.

Plan of Correction

Accept [redacted] - 03/31/2025)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken:

- 1. on 02/13/2025 by the Administrator to Educate the staff on abuse and abuse reporting.
- 2. on 02/13/2025 by the Administrator to Report the potential abuse to adult protective services.

To enhance the currently compliant operations, on 02/13/2025 the Administrator will Educate the staff on abuse and abuse reporting, Educate Staff member A on reporting abuse, with a completion date of 02/13/2025. Staff member A additionally educated by DHS representative on reporting abuse once a resident is safe, with a completion date of 02/20/2025.

Effective 02/13/2025 the Administrator will perform monthly reviews through 05/31/2025 to maintain ongoing compliance with reporting an incident or condition to the Department’s personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department, and to follow the guidelines in § 2600.15 (relating to abuse reporting covered by law). Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 04/16/2025

Implemented [redacted] - 04/18/2025)

42c Treatment of Residents

3. Requirements

2600.

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

Description of Violation

On [redacted] at 9:15pm, staff person A went into resident [redacted] room to help [redacted] get ready for bed and asked [redacted] if [redacted] like to change into [redacted] pajamas. The resident said no, and staff person A asked the resident two more times. The resident continued to refuse, said [redacted] was fine, was ready for bed and to leave [redacted] alone. Staff person A left the room and told staff person B that resident [redacted] refused 3 times to change into [redacted] pajamas. Staff person B said no follow me, walked down to resident [redacted] bedroom, ripped the covers off [redacted] and started pulling [redacted] up to the edge of the bed. Resident [redacted] said to leave [redacted] alone, [redacted] was fine and refused again. Staff person B continued to remove the resident's clothing, even though the resident kept refusing. Resident [redacted] looked at staff person A, yelled and said get out of my room. Staff person B pulled resident [redacted] pants and briefs down and the resident continued to refuse as staff person B changed the resident into [redacted] pajamas. Afterwards, staff person B told staff person A [redacted] needed to be more forceful with the residents.

Repeat Violation: [redacted]

Plan of Correction

Accept [redacted] - 03/31/2025)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken:

on 02/13/2025 by the Administrator to Suspend staff member B pending the outcome of the investigation.

on 02/13/2025 by the Administrator to Educate staff person A on abuse and reporting abuse. Staff member A additionally educated by DHS representative on reporting abuse once a resident is safe, with a completion date of 02/20/2025.

on 02/13/2025 by the Administrator to Educate all staff on abuse and abuse reporting.

To enhance the currently compliant operations:

on 02/13/2025 the Administrator will Continue to educate staff on abuse and abuse reporting. Schedule in person abuse training with adult protective services, with a completion date of 05/31/2025.

on 02/13/2025 the Administrator will Move staff member A to day shift for additional orientation, with a completion date of 03/09/2025.

on 02/13/2025 the Administrator will additionally train Staff member B on Abuse and Abuse reporting, Dementia and Dementia care, as well as Supervisory skills, with a completion date of 02/24/2025.

The overall completion date is 05/31/2025.

Effective 02/13/2025 the Administrator or designee will perform random education with staff members through 12/31/2025 to maintain ongoing compliance with immediately reporting 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. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 04/16/2025

Implemented [redacted] 04/18/2025)