

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

March 24, 2025

[REDACTED]  
TWINING RETIREMENT COMMUNITY LLC  
[REDACTED]

RE: HOLLAND SENIOR LIVING  
COMMUNITY  
1400 OLD JORDAN ROAD  
HOLLAND, PA, 18966  
LICENSE/COC#: 14657

[REDACTED],  
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/25/2025 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: *HOLLAND SENIOR LIVING COMMUNITY* License #: *14657* License Expiration: *08/30/2025*  
 Address: *1400 OLD JORDAN ROAD, HOLLAND, PA 18966*  
 County: *BUCKS* Region: *SOUTHEAST*

**Administrator**

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

**Legal Entity**

Name: *TWINING RETIREMENT COMMUNITY LLC*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *Other* Date: *03/13/1989* Issued By: *CWOPA L&I*

**Staffing Hours**

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

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Monitoring* Exit Conference Date: *02/25/2025*

**Inspection Dates and Department Representative**

02/25/2025 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *152* Residents Served: *63*

**Secured Dementia Care Unit**  
 In Home: *Yes* Area: *Fairview Court* Capacity: *25* Residents Served: *12*

**Hospice**  
 Current Residents: *5*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *63*  
 Diagnosed with Mental Illness: *2* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *42* Have Physical Disability: *0*

**Inspections / Reviews**

02/25/2025 Partial  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/21/2025*

03/24/2025 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: *03/24/2025*  
 Reviewer: [REDACTED] Follow-Up Type: *Bypass Document Submission*

Inspections / Reviews *(continued)*

03/24/2025 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/24/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

82c - Locking Poisonous Materials

1. Requirements

2600.

82.c. Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

Description of Violation

At 12:15 pm, the cabinet under the bathroom sink in room [redacted] in the secured unit was unlocked. A tube of Procare vitamin A & D ointment with a manufacturer's label indicating "if swallowed get medical help or contact Poison Control Center" was unlocked, unattended and accessible to the resident of room [redacted]. Not all residents of the home, including residents of the secure dementia care unit, have been assessed capable of recognizing and using poisons safely.

Plan of Correction

Accept [redacted] - 03/24/2025)

In order to show the facilities continued adherence to the regulations of the home, we acknowledge the violation of 2600.82c and are putting the following in work.

Issue: An ointment medication was located in an unlocked cabinet of the residents apartment.

Action: All items were removed from the cabinet and placed in a locked secure area of the unit. Call placed to Maintenance team to fix locking mechanism on cabinet.

Plan: Inservice will be completed by CSM to staff members of secured unit. Already started on 2/26. This includes physical daily rounds made by the memory care coordinator or designee in the evening hours. Disciplinary actions will be taken for anyone not adhering to the policy.

Sustain: CSM or Admin will make unannounced physical inspections at least 3x weekly for 2 weeks (already started), 2x weekly for 2 weeks and then weekly ongoing. See attached audit.

Licensee's Proposed Overall Completion Date: 03/21/2025

Implemented [redacted] 03/24/2025)

183e - Storing Medications

2. Requirements

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

The following medication cards were observed to have a punctured blister foil with the medication still present in the spot- exposing it to contamination and improper sanitation:

- [redacted]
- [redacted]
- [redacted]
- [redacted]
- [redacted]
- [redacted]

Plan of Correction

Accept [redacted] - 03/24/2025)

In order to show the facilities continued adherence to the regulations of the home, we acknowledge the violation of

**183e Storing Medications (continued)**

2600.183e and are putting the following in work.

*Issue:* Multiple blister packs had been punctured which can cause contamination and improper sanitation.

*Action:* All med carts in building were immediately checked for punctured blister packs. Inservice initiated for re education on importance of proper storage. Procedure on notifying charge nurse if it is punctured on a narcotic and disposal if it is not a narcotic.

*Plan:* Charge Nurses / CSM / Admin will be assigned to take one unit each week to ensure that the blister packs are intact.

*Sustain:* Audits for weekly inspection on all carts will be completed as attached for 4 weeks. If all blister packs are intact and staff is following the procedure, inspection will be reduced to the monthly audits.

**Licensee's Proposed Overall Completion Date:** 03/21/2025

**Implemented** [REDACTED] - 03/24/2025)