

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

May 15, 2025

[REDACTED]
Tunkhannock PA Healthcare Operations LLC
[REDACTED]

RE: Silver Springs at Tunkhannock
50 West Tioga Street
Tunkhannock, PA, 18657
LICENSE/COC#: 232820

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/11/2025 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 Springs at Tunkhannock License #: 232820 License Expiration:
Address: 50 West Tioga Street, Tunkhannock, PA 18657
County: WYOMING Region: NORTHEAST

Administrator

Name: Phone: Email:

Legal Entity

Name: Tunkhannock PA Healthcare Operations LLC
Address:
Phone: Email:

Certificate(s) of Occupancy

Type: I-2 Date: 06/18/2023 Issued By: L & I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 32 Waking Staff: 24

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Change Legal Entity Exit Conference Date: 03/11/2025

Inspection Dates and Department Representative

03/11/2025 - On-Site:

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: Residents Served: 24

Secured Dementia Care Unit

In Home: Yes Area: all Capacity: 38 Residents Served: 8

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 24
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 8 Have Physical Disability: 0

Inspections / Reviews

03/11/2025 Partial

Lead Inspector: Follow-Up Type: POC Submission Follow-Up Date: 04/07/2025

04/02/2025 - POC Submission

Submitted By: Date Submitted: 05/14/2025
Reviewer: Follow-Up Type: POC Submission Follow-Up Date: 04/09/2025

Inspections / Reviews *(continued)*

04/08/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/14/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 04/15/2025

05/15/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/14/2025

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 9:39 a.m., a bottle of Purell was found in an unlocked linen cart on the first-floor north hallway in the memory care unit with a warning label indicating if swallowed seek medical help or contact poison control right away.

Plan of Correction

Accept ([redacted] 04/02/2025)

The poisonous material was immediately removed from the linen cart on 3/11/25. All staff members will be retrained on this regulation regarding the proper storage and handling of poisonous materials by 4/11/25. The Administrator will review safety protocols and compliance expectations with staff members by same day. The facility Administrator will conduct random weekly audits for one month to ensure continued compliance.

Licensee's Proposed Overall Completion Date: 04/01/2025

Implemented [redacted] - 05/14/2025)

121a - Unobstructed Egress

2. Requirements

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

At approximately 11:30 a.m., the employee entrance and exit door would not open without the use of excessive force, preventing immediate egress in the event of an emergency.

Plan of Correction

Accept [redacted] - 04/08/2025)

Employee entrance door was difficult to push open upon inspection. Maintenance has inspected the door and will repair or replace push bar by 4/11/25 for easy egress.

Administrator will complete monthly checks of Stairways, hallways, doorways, passageways and egress routes from rooms and from the building ensuring them to be unlocked and unobstructed.

Proposed Overall Completion Date: 04/01/2025

Proposed Overall Completion Date: 04/08/2025

Licensee's Proposed Overall Completion Date: 04/08/2025

Implemented [redacted] - 05/14/2025)

233c - Key-Locking Devices

3. Requirements

2600.

233.c. If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

233c Key Locking Devices (continued)**Description of Violation**

At 9:25 a.m., there were no directions posted to operate the key locking device exiting the secured dementia sunroom.

Plan of Correction**Accept** [REDACTED] - 04/02/2025)

Upon discovery of missing directions posted for the locking keypad, a sign with the code inconspicuously hidden was posted at the exit at that time, 3/11/25. Administrator will do weekly audits at each keypad to monitor for one month and then will reassess the need to continue.

Licensee's Proposed Overall Completion Date: 04/01/2025

Implemented [REDACTED] - 05/14/2025)