

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

April 28, 2025

[REDACTED]
ADVANCED PERSONAL CARE HOME INC
[REDACTED]

RE: ADVANCED PERSONAL CARE HOME
245 CENTER STREET, PO BOX 5
CLARKSVILLE, PA, 15322
LICENSE/COC#: 44048

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/24/2025, 03/24/2025 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: ADVANCED PERSONAL CARE HOME **License #:** 44048 **License Expiration:** 12/15/2025

Address: 245 CENTER STREET, PO BOX 5, CLARKSVILLE, PA 15322

County: GREENE **Region:** WESTERN

Administrator

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

Legal Entity

Name: ADVANCED PERSONAL CARE HOME INC

Address: [REDACTED]

Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 38 **Waking Staff:** 29

Inspection Information

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

Reason: Complaint, Incident **Exit Conference Date:** 03/24/2025

Inspection Dates and Department Representative

03/24/2025 - On-Site: [REDACTED]

03/24/2025 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 39 **Residents Served:** 35

Secured Dementia Care Unit

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

Hospice

Current Residents: 1

Number of Residents Who:

Receive Supplemental Security Income: 31 **Are 60 Years of Age or Older:** 22

Diagnosed with Mental Illness: 35 **Diagnosed with Intellectual Disability:** 4

Have Mobility Need: 3 **Have Physical Disability:** 3

Inspections / Reviews

03/24/2025 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 04/11/2025

04/14/2025 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 04/28/2025

Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 04/21/2025

Inspections / Reviews *(continued)*

04/23/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/28/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 04/28/2025

04/28/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/28/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

16c - Written Incident Report

1. 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 approximately 7:00 a.m. resident #1 was sent to the hospital due to being found unresponsive. The home reported that the resident had fallen twice through the night and denied any pain/injury. The resident was found unresponsive in [REDACTED] bed at approximately 7:00 a.m. The home submitted an incident report to the Department regarding the resident falls and that resident was sent to the hospital. However, the home did not report to the Department that the resident passed away on [REDACTED] at 7:21 p.m. in the hospital.

Plan of Correction

Accept ([REDACTED] - 04/23/2025)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 04/11/2025 by the Administrator to Immediate action was taken by Administrator [REDACTED] and Co-Owner [REDACTED] on 3-24-25 to provide lead inspector [REDACTED] with [REDACTED] death certificate.

For preventive measures, a training provided by Administrator [REDACTED] on mandated reporting and incident reports was given to all employees on 4-9-25. Regulation 1600.1 c was reviewed during this training. A review of all prior incident reports will be completed by Administrator [REDACTED] and Administrative Assistant [REDACTED] by 5-4-25 to assure all pertinent and required information was submitted and completed in required time frame.

For compliance monitoring, In the future all incident reports will be submitted within the required 24HR time frame. Both a written and phone call report shall be submitted. Moving forward a monthly review of all incident reports will be completed by Administrator [REDACTED] and Administrative Assistant [REDACTED]. A chart of monthly incident reports shall be kept.

All Staff will be trained on regulation 2600.16b and policies and procedures training will be completed by Administrator [REDACTED] Documentation of training education of all staff will be kept in accordance with Regulation 2600.65 (i). A copy of training will be kept in main training log and also in each employees individual employee chart.

Licensee's Proposed Overall Completion Date: 04/22/2025

Implemented [REDACTED] 04/28/2025)