

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

May 19, 2025

[REDACTED]
PROVIDENCE PLACE OF PINE GROVE ASSOCIATES
[REDACTED]

RE: PROVIDENCE PLACE OF PINE
GROVE
24 HIKES HOLLOW ROAD
PINE GROVE, PA, 17963
LICENSE/COC#: 22550

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/24/2025 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: PROVIDENCE PLACE OF PINE GROVE License #: 22550 License Expiration: 11/03/2025
 Address: 24 HIKES HOLLOW ROAD, PINE GROVE, PA 17963
 County: SCHUYLKILL Region: NORTHEAST

Administrator

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

Legal Entity

Name: PROVIDENCE PLACE OF PINE GROVE ASSOCIATES
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 04/02/2001 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 111 Waking Staff: 83

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Incident Exit Conference Date: 04/24/2025

Inspection Dates and Department Representative

04/24/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 93 Residents Served: 67

Secured Dementia Care Unit
 In Home: Yes Area: entire home Capacity: 93 Residents Served: 44

Hospice
 Current Residents: 9

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 67
 Diagnosed with Mental Illness: 1 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 44 Have Physical Disability: 0

Inspections / Reviews

04/24/2025 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 05/22/2025

05/14/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 05/16/2025
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 05/21/2025

Inspections / Reviews (*continued*)

05/15/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/16/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 05/22/2025

05/19/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/16/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [redacted] while in the lobby, Resident [redacted] punched Resident [redacted] in the face 2 to 3 times and then shoved Resident [redacted] which resulted in a fall. Resident [redacted] suffered a [redacted].

Repeat Violation: [redacted]

Plan of Correction

Accept [redacted] - 05/14/2025)

At Providence Place, we offer training, activities, and Positive Approach to Care techniques that promote resident independence and comfort. Unfortunately, at times due to their disease process (dementia) they may grab, push, swing at another, or unintentionally harm another resident. We take this seriously and address the issue with MD visits, medication adjustments, social interventions, room relocation, have family provide 1:1, or possibly issue 30-day notice. Immediately following the incident, residents were separated and both sent to hospital for evaluations. Once Resident [redacted] returned to facility, [redacted] was moved to separate floor and opposite end of hallway from Resident [redacted]. Resident [redacted] returned to facility at 10:29pm on 3/8/25 with [redacted] and [redacted] and [redacted] was moved to new apartment at this time. [redacted] and [redacted] provided 1:1 from 3/8/25-3/12/25. [redacted] was placed on 1:1 with family members until follow up could be done by PCP and psych services. Resident [redacted] seen by PCP on 3/10/25 with new orders noted. Medications were adjusted but Resident [redacted] continued to have intermittent aggression even with [redacted] family members but managed effectively with medications. On 3/10/25, resident [redacted] was started on [redacted] daily and [redacted] was increased to [redacted] twice daily. Family felt that [redacted] was overstimulated due to size of community and ultimately chose to relocate to a smaller community. Resident [redacted] moved out on 3/18/25. Neither Resident [redacted] or [redacted] had any previous reports or incidents of aggressive behavior. Resident [redacted] still resides with us. ED will review abuse and neglect regulations and expectations with staff members during co-worker meetings on 5/13/25 and 5/14/25. ED and DON will continue to monitor current residents' status ongoing.

Licensee's Proposed Overall Completion Date: 05/16/2025

Implemented ([redacted] 05/19/2025)

233c - Key-Locking Devices

2. 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.

Description of Violation

The directions for operating the home's locking mechanism are not conspicuously posted near the gate to the Secure Dementia Care Unit's courtyard.

Plan of Correction

Accept [redacted] - 05/14/2025)

The sign for the code was posted but the final step had been covered with tape. The tape was immediately removed during physical walk-through on 4/24/25. The sign is now correct and posted on the interior and exterior of the gate. ED will monitor signage 1x week for 4 weeks then monthly x1 month and then ongoing to ensure that it stays

233c Key Locking Devices (continued)

posted and correct.

Licensee's Proposed Overall Completion Date: 06/30/2025

Implemented [REDACTED] - 05/19/2025)