

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

June 17, 2025

[REDACTED]
EM RURAL LIVING LLC
[REDACTED]

RE: THE WYNWOOD HOUSE AT STATE
COLLEGE
2360 BERNEL ROAD
STATE COLLEGE, PA, 16803
LICENSE/COC#: 23225

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/14/2025 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: THE WYNWOOD HOUSE AT STATE COLLEGE **License #:** 23225 **License Expiration:** 09/28/2025
Address: 2360 BERNEL ROAD, STATE COLLEGE, PA 16803
County: CENTRE **Region:** NORTHEAST

Administrator

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

Legal Entity

Name: EM RURAL LIVING LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-2 **Date:** 06/08/2018 **Issued By:** Centre Code

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 47 **Waking Staff:** 35

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint, Incident, Monitoring **Exit Conference Date:** 05/14/2025

Inspection Dates and Department Representative

05/14/2025 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 60 **Residents Served:** 42

Secured Dementia Care Unit

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

Hospice

Current Residents: 3

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 42
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 5 **Have Physical Disability:** 0

Inspections / Reviews

05/14/2025 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 05/31/2025

06/10/2025 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 06/16/2025
Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 06/15/2025

Inspections / Reviews (*continued*)

06/13/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/16/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 06/18/2025

06/17/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/16/2025

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 p.m. the home lost power due to severe storms. Power was not restored to the home until approximately 4:30 p.m. on [redacted]. The home did not report the incident to the department’s regional office until [redacted]

Plan of Correction

Accept [redacted] - 06/02/2025)

The Personal Care Home power outage policy was followed out by the Personal Care Home Staff. Personal Care Home update the Power outage Policy. Incident report form was submitted to the regional office, but due to power outage the regional office did not receive the incident report form until 5/2/2025. Correction is the Personal Care Home will submit the incident report form to the regional office within the 24-hour designated guideline. The administrator will oversee to ensure that compliance is being maintained.

This POC is complete.

Licensee's Proposed Overall Completion Date: 05/30/2025

Implemented [redacted] - 06/17/2025)

60a - Staff/Support Plan

2. Requirements

2600.

60.a. Staffing shall be provided to meet the needs of the residents as specified in the resident’s assessment and support plan.

Description of Violation

The home’s current census of 42 residents includes five residents with mobility needs who require the assistance of two staff persons for safe transfers and evacuation during emergencies. The five residents are: resident [redacted], resident [redacted], resident [redacted], resident [redacted] and resident [redacted]. The home’s direct care staff schedule indicates that from [redacted] to [redacted] only two staff persons were scheduled during the 3rd shift hours of 11:30 p.m. to 6:00 a.m. The home does not schedule an adequate number of staff persons to safely evacuate 42 residents during an emergency given that five of the residents require a two person assist.

Plan of Correction

Accept [redacted] - 06/13/2025)

The facility did have appropriate hours per regulations but with the number of 2 assists, the HR director implemented a 3rd person overnight, beginning immediately on [redacted]. HR has an on-call rotation and will utilize that for shift until a permanent is hired. Resident [redacted] did ctb on 6/7/25 on hospice services. Mobility needs did decrease but facility will continue the 3rd person on overnights. The HR director will continue to schedule and oversee to ensure that compliance is being maintained. Please see attachment titled-SC-June overnight schedule.

This POC is complete.

Licensee's Proposed Overall Completion Date: 06/13/2025

Implemented [redacted] - 06/17/2025)

107b - Emergency Procedures

3. Requirements

2600.

107.b. The home shall have written emergency procedures that include the following:

- 6. Alternate means of meeting resident needs in the event of a utility outage.

Description of Violation

The home's written emergency procedures for an electric utility outage does not include the duties and responsibilities that staff persons will take and an alternate means of meeting residents needs in the event of an electric utility outage.

Plan of Correction

Accept [REDACTED] 06/10/2025)

All actions performed by the home were appropriate for a power outage. The home only failed to have the written-out document to present.

The home assistant regional director updated the Power outage policy plan on [REDACTED] that includes the duties and responsibilities that staff persons will take and an alternate means of meeting residents needs in the event of an electric utility outage. The home administrator will review annually and make any updates and oversee to ensure compliance is being maintained.

Please see attachments titled-SC power outage policy

This POC is complete.

Licensee's Proposed Overall Completion Date: 05/30/2025

Implemented [REDACTED] 06/17/2025)