

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

August 6, 2025

[REDACTED], ADMINISTRATOR
MILTON DEVELOPMENTAL SERVICES INC
P.O. BOX 416
MILTON, PA, 17847

RE: MILTON DEVELOPMENTAL SERVICES
58 WALNUT STREET, P.O. BOX 416
MILTON, PA, 17847
LICENSE/COC#: 21373

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/03/2025 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: MILTON DEVELOPMENTAL SERVICES License #: 21373 License Expiration: 06/14/2026
 Address: 58 WALNUT STREET, P.O. BOX 416, MILTON, PA 17847
 County: NORTHUMBERLAND Region: NORTHEAST

Administrator

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

Legal Entity

Name: MILTON DEVELOPMENTAL SERVICES INC
 Address: P.O. BOX 416, MILTON, PA, 17847
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-1 Date: 03/17/2017 Issued By: L & I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 16 Waking Staff: 12

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
 Reason: Renewal Exit Conference Date: 06/03/2025

Inspection Dates and Department Representative

06/03/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 18 Residents Served: 15

Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:

Hospice
 Current Residents: 0

Number of Residents Who:
 Receive Supplemental Security Income: 5 Are 60 Years of Age or Older: 7
 Diagnosed with Mental Illness: 7 Diagnosed with Intellectual Disability: 7
 Have Mobility Need: 1 Have Physical Disability: 0

Inspections / Reviews

06/03/2025 - Full
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 06/30/2025

07/11/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 07/14/2025
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 07/15/2025

Inspections / Reviews (*continued*)

08/06/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/14/2025

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

51 - Criminal Background Check

1. Requirements

2600.

51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

Staff Person A began working in the home on [REDACTED] The home did not complete a Pennsylvania State Police Criminal Background Check for Staff Person A.

Plan of Correction

Accept ([REDACTED] - 07/11/2025)

6/3/25- Criminal background check was completed on staff person A. No issues were found.

6/5/25 - Each new employee will have a criminal background checked prion to hiring. The Administrator and the Asst. Administrator will ensure that this is completed.

6/5/25 - A form was put into place to check off that all items including the criminal background check is completed prior to starting work.

Administrator and Asst. Administrator will be responsible for this requirement.

Licensee's Proposed Overall Completion Date: 06/26/2025

Implemented ([REDACTED] - 08/06/2025)

100a - Exterior - Free of Hazards

2. Requirements

2600.

100.a. The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

Description of Violation

At approximately 9:18 a.m. the metal landing on the top floor fire escape was observed to be disconnected from the base on the front left side. The landing was elevated approximately 1.5 inches off the ground where detached, creating a possible tripping hazard.

Plan of Correction

Accept ([REDACTED] - 07/11/2025)

6/8/25- Maintenance repaired the fire escape with a metal strip and put non-skip material on the steps.

6/8/2025- Checking the fire escape was added to the daily checklist for maintenance.

The Maintenance Person and the Asst. Administrator are responsible for this requirement

Licensee's Proposed Overall Completion Date: 06/26/2025

Implemented ([REDACTED] - 08/06/2025)

101j6 - Mirror

3. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

6. A mirror.

101j6 - Mirror (continued)

Description of Violation

There is no mirror in bedroom #2.

Plan of Correction

Accept (█ - 07/11/2025)

6/8/25 - A mirror was placed in bedroom #2. Residents in that room were reminded to not remove the mirror and if it is broken to bring it to Administrator to be replaced.

6/8/25 - Checking the bedrooms daily was added to maintenance schedule to ensure that requirements are followed.

The Administrator and Maintenance person is responsible for this requirement

Licensee's Proposed Overall Completion Date: 06/26/2025

Implemented (█ - 08/06/2025)

103i - Outdated Food

4. Requirements

2600.

103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation

One dented can of tuna and one dented can of baked beans were located in the home's pantry shelf.

Plan of Correction

Accept (█ - 07/11/2025)

6/3/25 - The cans were disposed of during inspection by dietary staff.

6/3/25 - Dietary but a box in the food storage area for dented cans that come from distributor. At times the cans will come in dented. This will ensure that they are not used and we can receive refund for damaged cans.

6/3/25 - Each delivery day the dietary staff will check the food and rotate food on shelves, ensuring that any cans that are dented will be but in return/dented box and not used.

The dietary staff and Asst. Administrator will be responsible for this compliance.

Licensee's Proposed Overall Completion Date: 06/26/2025

Implemented (█ - 08/06/2025)

187a - Medication Record

5. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

Description of Violation

Resident #1 has a PRN prescription for Melatonin 3mg tablets. The medication is not included on the resident's medication administration record.

Plan of Correction

Accept (█ - 07/11/2025)

6/3/25 - The PRN was added to the MARS. We had just changed over from paper MARS to the computer program with the pharmacy. They had dropped this off the MARS by accident.

187a - Medication Record (continued)

6/3/25 - All MARS were checked by the Medical Director to ensure that all medications were put into the program correctly by the pharmacy.

6/3/25 - Medical Director will check all MARS on the first of the month to ensure that all medications are on each MARS is correct and will approve all new medications on MARS to eliminate errors.

The Medical Director and the Asst. Administrator will be responsible for this requirement.

Licensee's Proposed Overall Completion Date: 06/26/2025

Implemented ([REDACTED] - 08/06/2025)