

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

September 8, 2025

[REDACTED]
VIVE BENE, INC.
[REDACTED]

RE: TILBURG'S HOME FOR THE YOUNG
AT HEART
801 MARKET STREET
WILLIAMSPORT, PA, 17701
LICENSE/COC#: 21839

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/13/2025 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: TILBURG'S HOME FOR THE YOUNG AT HEART **License #:** 21839 **License Expiration:** 03/21/2026
Address: 801 MARKET STREET, WILLIAMSPORT, PA 17701
County: LYCOMING **Region:** NORTHEAST

Administrator

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

Legal Entity

Name: VIVE BENE, INC.
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 08/28/2001 **Issued By:** L&I

Staffing Hours

Resident Support Staff: 4 **Total Daily Staff:** 16 **Waking Staff:** 12

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Interim **Exit Conference Date:** 08/13/2025

Inspection Dates and Department Representative

08/13/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
License Capacity: 24 **Residents Served:** 12
Secured Dementia Care Unit
In Home: No **Area:** **Capacity:** **Residents Served:**
Hospice
Current Residents: 0
Number of Residents Who:
Receive Supplemental Security Income: 10 **Are 60 Years of Age or Older:** 6
Diagnosed with Mental Illness: 2 **Diagnosed with Intellectual Disability:** 3
Have Mobility Need: 0 **Have Physical Disability:** 0

Inspections / Reviews

08/13/2025 Partial
Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 08/29/2025

08/26/2025 - POC Submission
Submitted By: [REDACTED] **Date Submitted:** 09/08/2025
Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 09/02/2025

Inspections / Reviews (*continued*)

09/02/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/08/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 09/07/2025

09/08/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/08/2025

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], smoke from the upstairs apartment stove set off the fire alarm and emergency services responded. The home did not report this incident to the department.

Plan of Correction

Directed [REDACTED] - 09/02/2025)

1. This regulation is to ensure that the Department is informed of an emergency services visit.
2. The cause of this violation is smoke from the upstairs apartment stove set off the fire alarm. There was no notification made to the Department.
3. There had been no need for emergency services. The alarm was set off by cooking fumes.
4. The administrator will instruct the apartment residents to cook with the window open to reduce cooking fumes and use the exhaust fan in the apartment kitchen. Completed on 7/27/2025.
5. The apartment residents will be responsible for monitoring compliance. Agreed on 7/27/2025.
6. The apartment residents will open the window before cooking on the apartment stove. If necessary, they may decide to add an additional fan to assist with controlling cooking fumes.
7. The apartment residents and the administrator will have a verbal agreement to prevent another fire alarm.
8. The administrator will monitor monthly to ensure compliance.

Proposed Overall Completion Date: 08/28/2025

Directed: In addition to the above plan of correction, all staff will be educated on reporting requirements to the department. All future reportable incidents will be reported to the department within required time frames.

Directed Completion Date: 09/07/2025

Implemented [REDACTED] 09/08/2025)

132f - Alternate Exit Routes

2. Requirements

2600.

132.f. Alternate exit routes shall be used during fire drills.

Description of Violation

The front door exit route was used during the fire drills held on [REDACTED], and [REDACTED]

Plan of Correction

Accept [REDACTED] - 08/26/2025)

1. This regulation is to ensure that residents use different exits during fire drills.
2. Residents have been using one exit during fire drills.
3. Staff will direct residents to use different exits during fire drills.

132f Alternate Exit Routes (continued)

4. *The staff running the fire drill will instruct other staff and residents which exits are unavailable.*
5. *The administrator/designee will instruct all staff to ensure that different exits are used during fire drills.*
6. *This situation will be ongoing.*
7. *The staff was given repeated verbal instructions on August 19, 2025. A fire drill was run on August 20, 2025 using rear exits only.*
8. *The administrator/designee will verify different exits are used monthly.*

Licensee's Proposed Overall Completion Date: 08/22/2025

Implemented [REDACTED] - 09/08/2025)