

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

September 18, 2025

[REDACTED]
TWINING RETIREMENT COMMUNITY LLC
[REDACTED]

RE: HOLLAND SENIOR LIVING
COMMUNITY
1400 OLD JORDAN ROAD
HOLLAND, PA, 18966
LICENSE/COC#: 14657

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/18/2025 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: HOLLAND SENIOR LIVING COMMUNITY **License #:** 14657 **License Expiration:** 08/30/2026
Address: 1400 OLD JORDAN ROAD, HOLLAND, PA 18966
County: BUCKS **Region:** SOUTHEAST

Administrator

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

Legal Entity

Name: TWINING RETIREMENT COMMUNITY LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: Other **Date:** 03/13/1989 **Issued By:** CWOPA L&I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 84 **Waking Staff:** 63

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint, Incident **Exit Conference Date:** 08/18/2025

Inspection Dates and Department Representative

08/18/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 152 **Residents Served:** 52

Secured Dementia Care Unit

In Home: Yes **Area:** Fairview Court **Capacity:** 27 **Residents Served:** 8

Hospice

Current Residents: 9

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 57
Diagnosed with Mental Illness: 2 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 32 **Have Physical Disability:** 2

Inspections / Reviews

08/18/2025 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 09/05/2025

09/10/2025 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 09/18/2025
Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 09/15/2025

Inspections / Reviews *(continued)*

09/18/2025 POC Submission

Submitted By: [REDACTED] Date Submitted: 09/18/2025
Reviewer: [REDACTED] Follow Up Type: *Bypass Document Submission*

09/18/2025 Bypass Document Submission

Submitted By: [REDACTED] Date Submitted: 09/18/2025
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] Resident [redacted] reported to Staff Person A, that a male came into their room and touch them with their penis. The home did not submit an incident report to the Department. The home did not report this incident to the department until [redacted]

Plan of Correction

Accept ([redacted] - 09/18/2025)

Issue: Staff member receiving the report of an incident did not report issue within 24 hours to the department.

Action: Education and training given by the administrator to the clinical service manager completed immediately as attached.

Plan: Administrator and Director of Nursing will review stand up (morning meeting) with the charge nurse on a daily basis. Starting 9/10/25.

Sustain: Administrator will be the backup to all initial reportable to be sent to DHS in order to stay in compliance with regulation 2600.16c. An audit will be kept by Administrator for the next 90 days to ensure compliance. See attached.

Licensee's Proposed Overall Completion Date: 09/15/2025

Implemented ([redacted] - 09/18/2025)

54a - Direct Care Staff

2. Requirements

2600.

54.a. Direct care staff persons shall have the following qualifications:

- 1. Be 18 years of age or older, except as permitted in subsection (b).
- 2. Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry.
- 3. Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care services with reasonable skill and safety.

Description of Violation

Direct care staff person B, does not have a high school diploma, GED, or active registry status on the Pennsylvania nurse aide registry.

repeat violation: [redacted] et al, [redacted]

Plan of Correction

Accept ([redacted] - 09/10/2025)

Issue: DCS member did not have a diploma, GED or active registry on file.

Action: Administrator Immediately contacted staff member to send diploma. Staff member provided the attached communication and is actively waiting for the diploma. This is verifying that [redacted] indeed received one.

Plan: Staff records will be pulled to ensure a diploma, GED or active registry is in the employee file by 9/18/25 by Administrator.

Sustain: Checklist provided to front of all active staff members to ensure accuracy of the diploma, GED or active registry. This will be upon each hired employee.

54a - Direct Care Staff (continued)

Licensee's Proposed Overall Completion Date: 09/18/2025

Implemented (█ - 09/18/2025)

227g -Support Plan Signatures

3. Requirements

2600.

227.g. Individuals who participate in the development of the support plan shall sign and date the support plan.

Description of Violation

Resident █ participated in the development of █ support plan on █. However, the resident did not sign the support plan.

Plan of Correction

Accept █ - 09/10/2025)

Issue: Support Plan was not signed by the resident or checked off for acknowledgment.

Action: Care Plan was marked immediately See attached, by the Clinical Service Manager.

Plan: Education provided by Administrator to Clinical Service Manager and Charge Nurses to ensure knowledge of signing off the appropriate areas. All Care Plans will be reviewed by Clinical Service Manager by 9/12/25 to ensure that all plans are signed or marker appropriately.

Licensee's Proposed Overall Completion Date: 09/12/2025

Implemented █ - 09/18/2025)