

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

October 22, 2025

[REDACTED]
Kelly Youkin
[REDACTED]

RE: Kelly Youkin's Personal Care Home
142 Fairview Street
Confluence, PA, 15424
LICENSE/COC#: 34080

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/21/2025 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: Kelly Younkin's Personal Care Home	License #: 34080	License Expiration:
Address: 142 Fairview Street, Confluence, PA 15424		
County: SOMERSET	Region: CENTRAL	

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

Legal Entity		
Name: Kelly Youkin		
Address: [REDACTED]		
Phone: [REDACTED]	Email: [REDACTED]	

Certificate(s) of Occupancy		
Type: C-2 LP	Date: 09/02/1998	Issued By: L&I

Staffing Hours		
Resident Support Staff: 0	Total Daily Staff: 18	Waking Staff: 14

Inspection Information		
Type: Partial	Notice: Announced	BHA Docket #:
Reason: Interim	Exit Conference Date: 08/21/2025	

Inspection Dates and Department Representative	
08/21/2025 - On-Site: [REDACTED]	

Resident Demographic Data as of Inspection Dates			
General Information			
License Capacity:		Residents Served: 18	
Secured Dementia Care Unit			
In Home: No	Area:	Capacity:	Residents Served:
Hospice			
Current Residents: 0			
Number of Residents Who:			
Receive Supplemental Security Income: 15		Are 60 Years of Age or Older: 15	
Diagnosed with Mental Illness: 18		Diagnosed with Intellectual Disability: 1	
Have Mobility Need: 0		Have Physical Disability: 2	

Inspections / Reviews		
08/21/2025 Partial		
Lead Inspector: [REDACTED]	Follow-Up Type: POC Submission	Follow-Up Date: 09/12/2025
09/11/2025 - POC Submission		
Submitted By: [REDACTED]	Date Submitted: 09/18/2025	
Reviewer: [REDACTED]	Follow-Up Type: Document Submission	Follow-Up Date: 09/18/2025

Inspections / Reviews *(continued)*

10/22/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/18/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

92 - Windows

1. Requirements

2600.

92. Windows and Screens - Windows, including windows in doors, must be in good repair and securely screened when doors or windows are open.

Description of Violation

The resident room located on the 1st floor at the rear of the home did not have a screen installed on the window.

Plan of Correction

Accept ([redacted] - 09/11/2025)

Missing window screen will be rebuilt by Confluence Hardware by 10/01/2025. Administrator, or designee, shall make weekly rounds to assess for missing or damaged screens beginning 10/1/25.

Proposed Overall Completion Date: 10/01/2025

Licensee's Proposed Overall Completion Date: 10/01/2025

Implemented ([redacted] - 10/21/2025)

93a - Handrails

2. Requirements

2600.

93.a. Each ramp, interior stairway and outside steps must have a well-secured handrail.

Description of Violation

The wooden hand railing used for the cement ramp leading to the entrance of the home was rotted, presenting a hazard.

Plan of Correction

Accept ([redacted] - 09/11/2025)

The wooden handrails of the entry ramp were replaced on 8/23/2025 by an out side source. Administrator, or designee, shall do weekly rounds to ensure all handrails are well secured and in good repair beginning 9/8/25.

Proposed Overall Completion Date: 09/08/2025

Licensee's Proposed Overall Completion Date: 09/08/2025

Implemented ([redacted] - 10/21/2025)

126a - Furnace Inspection

3. Requirements

2600.

126.a. A professional furnace cleaning company or trained maintenance staff person shall inspect furnaces at least annually. Documentation of the inspection shall be kept.

Description of Violation

The last inspection of the furnace was conducted on [redacted].

Plan of Correction

Accept ([redacted] - 09/11/2025)

Furnace/boiler cleaning was performed by Lytle Construction on 8/27/2025. Administrator, or designee, shall add boiler/furnace cleaning to tracking sheet to ensure it is scheduled to comply with annual requirement.

Licensee's Proposed Overall Completion Date: 09/08/2025

Implemented ([redacted] - 10/03/2025)

132b - Safety Inspection/Fire Drill

4. Requirements

2600.

132.b. A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.

Description of Violation

The last fire safety inspection and fire drill conducted by a fire safety expert was done on [REDACTED]

Plan of Correction

Accept [REDACTED] 09/11/2025)

[REDACTED] Confluence Volunteer Fire Department Chief, was on site to perform fire safety inspection and fire drill on 8/26/2025. Fire safety inspection and fire drill with fire company will be added to the tracking sheet by administrator. Administrator, or designee, will ensure it is scheduled within the annual allotment time.

Licensee's Proposed Overall Completion Date: 09/08/2025

Implemented [REDACTED] - 10/02/2025)

132d - Evacuation

5. Requirements

2600.

132.d. Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert. For purposes of this subsection, the fire safety expert may not be a staff person of the home.

Description of Violation

The home does not have a maximum safe evacuation time specified in writing within the past year by a fire safety expert. The home exceeded an evacuation time of 2 minutes 30 seconds during the fire drill on [REDACTED] at 10:30 AM, which took 2 minutes and 49 seconds to evacuate all of the residents out of the home.

Plan of Correction

Accept [REDACTED] - 09/11/2025)

Fire drill completed with CVFD on 8/26/2025 with all staff present. Importance and significance of adhering to 2 minute and 30 second evacuation time explained by fire chief. All future fire drills will be completed within time limit or repeated within that month if time limit is exceeded. Administrator, or designee, will ensure that all components of fire drills are recorded accurately and are compliant by double checking the fire drill log monthly.

Licensee's Proposed Overall Completion Date: 09/08/2025

Implemented [REDACTED] - 10/02/2025)

254c - Records Storing

6. Requirements

2600.

254.c. Resident records shall be stored in locked containers or a secured, enclosed area used solely for record storage and be accessible at all times to the administrator or the administrator's designee, and upon request, to the Department or representatives of the area agency on aging.

254c - Records Storing (continued)**Description of Violation**

Resident records were accessible in the director's office located on the first floor in the back of the building. This office was unlocked and is a shared space connected to the kitchen which is used by staff and contracted providers to meet with residents.

Plan of Correction**Accept** [REDACTED] - 09/11/2025)

Locking filing cabinet obtained and put into use by administrator on 9/8/2025. Administrator, or designee, shall ensure resident records are secured in accordance with regulations in a secure manner at all times and only be accessible to approved persons.

Licensee's Proposed Overall Completion Date: 09/08/2025

Implemented ([REDACTED] - 10/02/2025)