



Pennsylvania Department of Human Services

Sent via e-mail to: [REDACTED]

E-mailed on: 12/30/25

[REDACTED], Administrator
Jeffco Health Services INC
417 Rt. 28
Brookville, PA 15825

RE: Penn Highlands Jefferson Manor P.C.
LICENSE/COC #: 406242

Dear [REDACTED]:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on 8/21/25 of the above facility, we have determined that your submitted plan of correction is not fully implemented. Correction of these violations in accordance with the specified plan of correction is required. Continued compliance must be maintained.

Sincerely,

[REDACTED]

Enclosure

Licensing Inspection Summary

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

Facility Information

Name: PENN HIGHLANDS JEFFERSON MANOR P. C. License #: 40624 License Expiration: 10/11/2025
Address: 417 RT. 28, BROOKVILLE, PA 15825
County: JEFFERSON Region: WESTERN

Administrator

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

Legal Entity

Name: JEFFCO HEALTH SERVICES INC
Address: 417 RT. 28, BROOKVILLE, PA, 15825
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 02/09/1994 Issued By: Dept L &I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 40 Waking Staff: 30

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint 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: 48 Residents Served: 25

Secured Dementia Care Unit

In Home: Yes Area: 2nd floor Capacity: 24 Residents Served: 14

Hospice

Current Residents: 5

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 25
Diagnosed with Mental Illness: 20 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 15 Have Physical Disability: 0

Inspections / Reviews

08/21/2025 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 09/20/2025

Inspections / Reviews (*continued*)

09/13/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/16/2025

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 09/19/2025

09/15/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/16/2025

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 09/18/2025

12/03/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/16/2025

Reviewer: [REDACTED]

Follow-Up Type: Enforcement

15a - Resident Abuse Report

1. Requirements

2600.

15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

On the night of 7/21/25 during the 11:00 p.m. - 7:00 a.m. shift, resident #1 told staff person A that [redacted] and staff person B hold hands, and [redacted] helps [redacted] take [redacted] clothes off at night. However, the home did not report this allegation of abuse to the local Area Agency on Aging until 7/23/25 at 8:00 a.m.

On 8/9/25 at approximately 8:31 p.m., in the secured dementia care unit, staff found resident #2 in resident #3's bedroom, unsupervised and kissing the resident on the lips and face as [redacted] was lying in the bed. However, the home did not report this allegation of abuse to the local Area Agency on Aging until 8/11/25 at 12:00 p.m.

Plan of Correction

Do Not Accept ([redacted] - 09/13/2025)

Staff to report all suspected abuse to Area Agency on Aging immediately and to RCC or administrator. After report is made RCC or administrator are to report the incident to DHS. Staff will be reeducated on what to report and when.

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

Update: 09/13/2025

Please indicate who reeducated staff and on what date.

Please add a step to include the administrator or designee will immediately call the local Area Agency on Aging to report any allegations of abuse. Within 48 hours of the initial verbal report, the administrator or designee will submit a Mandatory Abuse Reporting Form to the local Area Agency on Aging. Please indicate begin date.

Please add a weekly monitoring step to include the administrator or designee will review all allegations of abuse to ensure the administrator or designee immediately called the local Area Agency on Aging to report any allegations of abuse and within 48 hours of the initial verbal report, the administrator or designee submitted a Mandatory Abuse Reporting Form to the local Area Agency on Aging. Documentation will be kept. Please indicate begin date.

Plan of Correction

Accept ([redacted] - 09/15/2025)

Staff to report all suspected abuse to Area Agency on Aging immediately and to RCC or administrator. After report is made RCC or administrator are to report the incident to DHS. Staff will be reeducated by administrator or designee person. On 10/1/25 on what to report and when. Administrator or designee will immediately call the local Area Agency on Aging to report any allegations of abuse. Within 48 hours of the initial verbal report, the administrator or designee will submit a Mandatory Abuse Reporting Form to the local Area Agency on Aging starting 9/15/25. Weekly monitoring to begin on 9/15/25 to include the administrator or designee will review all allegations of abuse to ensure the administrator or designee immediately called the local Area Agency on Aging to report any allegations of abuse and within 48 hours of the initial verbal report, the administrator or designee submitted a Mandatory Abuse Reporting Form to the local Area Agency on Aging. Documentation will be kept.

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

15a - Resident Abuse Report (continued)

Evidence of Completion

Not Implemented () - 12/03/2025

See attached.

15b - Supervisor Plan

2. Requirements

2600.

15.b. If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

Description of Violation

On the night of 7/21/25 during the 11:00 p.m. - 7:00 a.m. shift, resident #1 told staff person A that [redacted] and staff person B hold hands, and [redacted] helps [redacted] take [redacted] clothes off at night. However, staff person B continued to work unsupervised in the home on [redacted] and on [redacted] without an approved plan of supervision from the Department.

Plan of Correction

Do Not Accept () - 09/13/2025

If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident. RCC and administrator to reeducate staff on abuse.

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

Update: 09/13/2025

Please indicate the date staff were reeducated.

Please add a weekly monitoring step, to include the administrator or designee will review all incidents, conditions, and allegations of abuse, to ensure any staff person involved in suspected abuse of a resident served in the home is immediately suspended or placed on a plan of supervision, and will remain suspended or on a plan of supervision until the Department notifies the home the suspension or plan of supervision may be lifted. Documentation will be kept. Please indicate begin date.

Plan of Correction

Accept () - 09/15/2025

If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident. RCC and administrator to reeducate staff on abuse on 10/1/25. A weekly monitoring step, to include the administrator or designee will review all incidents, conditions, and allegations of abuse, to ensure any staff person involved in suspected abuse of a resident served in the home is immediately suspended or placed on a plan of supervision, and will remain suspended or on a plan of supervision until the Department notifies the home the suspension or plan of supervision may be lifted. To begin on 9/15/25.

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

Evidence of Completion

Implemented () - 12/03/2025

See attached.

16c - Written Incident Report

3. 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 the night of 7/21/25 during the 11:00 p.m. - 7:00 a.m. shift, resident #1 told staff person A that [redacted] and staff person B hold hands, and [redacted] helps [redacted] take [redacted] clothes off at night. However, the home did not report this allegation of abuse to the Department.

On 8/9/25 at approximately 8:31 p.m., in the secured dementia care unit, staff found resident #2 in resident #3’s bedroom, unsupervised and kissing the resident on the lips and face as [redacted] was lying in the bed. However, the home did not report this allegation of abuse to the Department until 8/11/25 at 11:15 a.m.

Plan of Correction

Do Not Accept ([redacted] - 09/13/2025)

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. Staff to be reeducated on reporting abuse and how and when.

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

Update: 09/13/2025

Please indicate who reeducated staff and on what date.

Please add a weekly monitoring step to include the administrator or designee will review all incidents and conditions to ensure reportable incidents and conditions are reported to the Department within 24 hours. Documentation will be kept. Please indicate begin date.

Plan of Correction

Accept ([redacted] - 09/15/2025)

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. Administrator or designee will reeducate staff on 10/1/25. A weekly monitoring step to include the administrator or designee will review all incidents and conditions to ensure reportable incidents and conditions are reported to the Department within 24 hours, will begin on 9/15/2025

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

Evidence of Completion

Implemented ([redacted] - 12/03/2025)

See attached.