



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 9/11/25 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 - PUBLIC

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: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 42 Waking Staff: 32

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint Exit Conference Date: 09/16/2025

Inspection Dates and Department Representative

09/11/2025 - On-Site [REDACTED]
09/16/2025 - Off-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 48 Residents Served: 27

Secured Dementia Care Unit

In Home: Yes Area: second floor Capacity: 24 Residents Served: 15

Hospice

Current Residents: 3

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 27
Diagnosed with Mental Illness: 20 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 15 Have Physical Disability: 0

Inspections / Reviews

09/11/2025 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 10/16/2025

10/20/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/30/2025

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 10/22/2025

10/24/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/30/2025

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 11/10/2025

12/03/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/30/2025

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 9/1/25, at approximately 9:00 pm., resident #1 indicated [REDACTED] requested the medication Milk of Magnesium and requested 911 to be called due to swallowing issues and concern of choking. Resident #1 has a diagnosis of Dysphagia with a prescribed pureed diet, as indicated on the medical evaluation. Resident #1 indicated staff person A refused to give the medication and to call 911. Resident #1 then proceeded to ask another staff person to call 911. On 9/2/25, resident #1 contacted the local Area Agency on Aging concerning the medication and emergency call refusal. The local Ombudsman representative followed up with the resident's concern with the home. However, this allegation was not reported to the local Area Agency on Aging.

Plan of Correction

Directed ([REDACTED] - 10/24/2025)

[REDACTED] the Administrator reeducated the staff on 9/24/25 about reporting resident abuse to Area of Aging immediately. A weekly monitoring step to include the administrator or designee will review all incidents and conditions to ensure any allegation of abuse is immediately reported to the local Area Agency on Aging. Documentation will be kept.

Proposed Overall Completion Date: 10/22/2025

Directed:

By 11/3/25 and weekly thereafter, the administrator or designee will review all incidents and conditions to ensure any allegation of abuse is immediately reported to the local Area Agency on Aging. Documentation will be kept.

[REDACTED] 10/24/25

Directed Completion Date: 11/03/2025

Not Implemented ([REDACTED] - 12/03/2025)

16c - Written Incident Report

2. 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 9/1/25, at approximately 9:00 pm., resident #1 indicated [REDACTED] requested the medication Milk of Magnesium and requested 911 to be called due to swallowing issues and concern of choking. Resident #1 has a diagnosis of Dysphagia with a prescribed pureed diet, as indicated on the medical evaluation. Resident #1 indicated staff person A refused to give the medication and to call 911. Resident #1 then proceeded to ask another staff person to call 911. On 9/2/25, resident #1 contacted the local Area Agency on Aging concerning the medication and emergency call refusal. The local Ombudsman representative followed up with the resident's concern with the home. The home did not report this

16c - Written Incident Report (continued)

incident to the Department.

Plan of Correction

Directed () - 10/24/2025

The administrator/designated person 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 will re-educate all staff regarding the requirement that the home must report all reportable incidents or conditions to the Department within 24 hours. Documentation will be kept. A weekly monitoring step to include the administrator or designee will review all incidents and conditions to ensure all reportable incidents or conditions are reported to the Department within 24 hours. Documentation will be kept.

Proposed Overall Completion Date: 11/03/2025

Directed:

By 11/3/25 and weekly thereafter, the administrator or designee will review all incidents and conditions to ensure all reportable incident or conditions are reported to the Department within 24 hours. Documentation will be kept.

10/24/25

Directed Completion Date: 11/03/2025

Implemented () - 12/03/2025

187b - Date/Time of Medication Admin.

4. Requirements

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

Resident #1 is prescribed multiple medications, to include Mirtazapine, Atorvastatin, Risperidone, and Haloperidol. Resident #1's September 2025 medication administration record did not include the initials of the staff person who administered these medications on 9/7/25:

- * Mirtazapine - 8:00 pm.
- * Atorvastatin - 8:30 pm.
- * Risperidone - 8:30 pm.
- * Haloperidol - 8:30 pm.

Plan of Correction

Directed () - 10/24/2025

The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered. Staff was reeducated on the importance of maintaining an proper MAR. Administrator () Reeducated staff on 9/10/25. A weekly monitoring step, to include the administrator or designated staff person qualified to administer medications will conduct an audit of all resident medications, to ensure all medications have a physician's order, and compare physician's orders to resident medication administration records to ensure all prescribed medications are present in the home, indicated on resident MARs, administered in accordance with the prescriber's directions and administration is documented on the resident medication administration record. Documentation will be kept.

187b - Date/Time of Medication Admin. (continued)

Proposed Overall Completion Date: 10/22/2025

Directed:

By 11/3/25 and weekly thereafter, the administrator or designated staff person qualified to administer medications will conduct an audit of all resident medications, to ensure all medications have a physician's order, and compare physician's orders to resident medication administration records to ensure all prescribed medications are present in the home, indicated on resident MARs, administered in accordance with the prescriber's directions and administration is documented on the resident medication administration record. Documentation will be kept. Please indicate begin date.

■ 10/24/25

Directed Completion Date: 11/03/2025

Implemented (■ - 12/03/2025)