

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

December 16, 2025

[REDACTED]
MAPLE SHADE MEADOWS LP
[REDACTED]
[REDACTED]

RE: MAPLE SHADE MEADOWS SENIOR
LIVING
50 EAST LOCUST STREET
NESQUEHONING, PA, 18240
LICENSE/COC#: 20400

Dear Tiffany Hall,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/24/2025 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]
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: MAPLE SHADE MEADOWS SENIOR LIVING License #: 20400 License Expiration: 11/20/2025
 Address: 50 EAST LOCUST STREET, NESQUEHONING, PA 18240
 County: CARBON Region: NORTHEAST

Administrator

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

Legal Entity

Name: MAPLE SHADE MEADOWS LP
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 117 Waking Staff: 88

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint Exit Conference Date: 09/24/2025

Inspection Dates and Department Representative

09/24/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 85 Residents Served: 72

Secured Dementia Care Unit
 In Home: Yes Area: N/A Capacity: 25 Residents Served: 16

Hospice
 Current Residents: 6

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 72
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 45 Have Physical Disability: 0

Inspections / Reviews

09/24/2025 Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 10/26/2025

11/10/2025 - POC Submission

Submitted By: [REDACTED] Date Submitted: 12/01/2025
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 11/17/2025

Inspections / Reviews *(continued)*

11/24/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/01/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 11/26/2025

12/16/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/01/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

185a - Implement Storage Procedures

1. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident [redacted] receives [redacted] checks 3 times daily at 7:00 a.m., 11:00 a.m. and 4:00 p.m. The resident had a blood glucose reading of [redacted] noted in the resident's glucometer on [redacted] at 11:00 a.m. which was recorded on the resident's medication record as [redacted].

Plan of Correction

Accept [redacted] - 11/24/2025)

Documentation books were created for all med-techs to log blood sugars every time they take one. Assistant director of nursing will be responsible for fixing the problem and for auditing documentation weekly to ensure ongoing compliance related to 2600.185(a) Administrator and Assistant administrator will monitor ongoing compliance to ensure the violation will not happen again.

Licensee's Proposed Overall Completion Date: 11/17/2025

Implemented [redacted] 12/16/2025)

187a - Medication Record

2. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

Description of Violation

Resident [redacted] is prescribed [redacted] pen to be administered on a sliding scale 3 times daily at 8:00 a.m., 12:00 p.m. and 5:00 p.m. However, resident [redacted] medication administration record does not indicate the number of units of insulin administered on [redacted] at 5:00 p.m.

Resident [redacted] is prescribed [redacted] tablets daily at 8:00 a.m. which is to be held if the resident has a systolic blood pressure less than [redacted] or a heart rate less than [redacted]. However, resident [redacted] medication administration record does not indicate the resident's heart rate readings.

Plan of Correction

Accept [redacted] 11/24/2025)

Administrator created parameter documentation books for staff to log any parameters (blood pressures, heart rates, glucose readings, weights). These books will be routinely audited by director of nursing to ensure accuracy and completion. Director of nursing to ensure compliance related to 2600.187(2) by auditing documentation weekly. Administrator and assistant administrator to ensure ongoing compliance to ensure the violation will not happen again.

Licensee's Proposed Overall Completion Date: 11/17/2025

Implemented [redacted] - 12/16/2025)