

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

January 12, 2026

[REDACTED]
RENAISSANCE HOME PINEBROOK LLC
[REDACTED]

RE: RENAISSANCE HOME PINEBROOK
2 WOODBRIDGE ROAD
ORWIGSBURG, PA, 17961
LICENSE/COC#: 22755

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/30/2025 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: *RENAISSANCE HOME PINEBROOK* License #: *22755* License Expiration: *05/20/2026*
 Address: *2 WOODBRIDGE ROAD, ORWIGSBURG, PA 17961*
 County: *SCHUYLKILL* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *RENAISSANCE HOME PINEBROOK LLC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-2* Date: *08/29/2018* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *34* Waking Staff: *26*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Interim* Exit Conference Date: *09/30/2025*

Inspection Dates and Department Representative

09/30/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *68* Residents Served: *28*
 Secured Dementia Care Unit
 In Home: *No* Area: Capacity: Residents Served:
 Hospice
 Current Residents: *0*
 Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *28*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *6* Have Physical Disability: *0*

Inspections / Reviews

09/30/2025 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *12/17/2025*

12/16/2025 - Document Submission
 Submitted By: [REDACTED] Date Submitted: *01/12/2026*
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *12/19/2025*

Inspections / Reviews *(continued)*

01/12/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/12/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

95 Furniture and Equipment

1. Requirements

2600.

95. Furniture and Equipment Furniture and equipment must be in good repair, clean and free of hazards.

Description of Violation

There are burn marks around an outlet located in the hallway next to the air conditioning unit. According to the home's most recent fire safety inspection letter dated [REDACTED] the outlet needs to be inspected by an electrician. According to the home's administrator the outlet has not yet been inspected by an electrician.

Plan of Correction
(Directed)

Directed [REDACTED] 12/03/2025)

The home will fix the outlet in the hallway next to the air conditioning unit by a license electrician. The fire inspection letter dated 6/24/25 needs to be updated that the outlet is fix and up to code. The home's maintenance person will complete monthly audits of all outlets in the home and document results. The home will keep these audits.

Directed Completion Date: 12/17/2025

Implemented [REDACTED] 01/12/2026)

144c1 Smoking Area Guidelines

2. Requirements

2600.

144.c. A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures that include the following:

Description of Violation

At 12:06 p.m. cigarette butts were observed along the ground of the outdoor patio resident smoking area. Piles of ashes were also observed on the ground as well as along the brick ledge of a window next to a chair. The brick ledge was blackened indicating cigarette butts had been extinguished directly on the brick.

Plan of Correction
(Directed)

Directed [REDACTED] - 12/03/2025)

The home's administrator will assign staff on each shift to clean the home's smoking area around the grounds. The home will create an audit tool and document each shift clean of the smoking area and have staff sign and date. The administrator will complete daily checks for compliance.

Directed Completion Date: 12/17/2025

Implemented [REDACTED] 01/12/2026)

187d Follow Prescriber's Orders

3. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident # [redacted] an order for blood glucose checks four times daily with insulin administered on a sliding scale basis. On [redacted] at 5:00 p.m. there was a blood glucose reading of [redacted] documented on resident [redacted] Medication Administration Record (MAR), with [redacted] of insulin administered. There was no 5:00 p.m. blood glucose reading found in resident [redacted]s glucometer for [redacted]

Resident [redacted] has an order for [redacted], twice daily, hold for systolic blood pressure less than 100 or heart rate less than 60. On the following dates and times resident #2's heart rate was less than 60 but the medication was still administered:

[redacted]

Also, resident [redacted] has an order for wound care daily every morning. On [redacted] at 8:00 a.m. wound care was not completed.

Plan of Correction

Directed [redacted] - 12/03/2025)

(Directed)

The home will retrain all med techs for checking resident's parameters before dispensing medication and following prescriber's orders. This training will be kept by the home. The home will complete weekly audits of all residents MARs and document the audit. The audits will be maintained at the home upon the Departments request. The home's administrator will complete a weekly audit and document.

Directed Completion Date: 12/17/2025

Implemented [redacted] - 01/12/2026)