

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

December 3, 2025

[REDACTED]  
MECHANICSBURG SENIOR CARE LLC

[REDACTED]  
ATTN GREG TOOT  
[REDACTED]

RE: VIBRA SENIOR LIVING  
707 SHEPHARDSTOWN ROAD  
MECHANICSBURG, PA, 17055  
LICENSE/COC#: 33109

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/10/2025 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:** VIBRA SENIOR LIVING **License #:** 33109 **License Expiration:** 10/23/2025  
**Address:** 707 SHEPHARDSTOWN ROAD, MECHANICSBURG, PA 17055  
**County:** CUMBERLAND **Region:** CENTRAL

**Administrator**

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

**Legal Entity**

**Name:** MECHANICSBURG SENIOR CARE LLC  
**Address:** [REDACTED]  
**Phone:** [REDACTED] **Email:** [REDACTED]

**Certificate(s) of Occupancy**

**Type:** I-2 **Date:** 12/12/2013 **Issued By:** Upper Allen Township

**Staffing Hours**

**Resident Support Staff:** 0 **Total Daily Staff:** 37 **Waking Staff:** 28

**Inspection Information**

**Type:** Partial **Notice:** Unannounced **BHA Docket #:**  
**Reason:** Incident **Exit Conference Date:** 10/10/2025

**Inspection Dates and Department Representative**

10/10/2025 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 46 **Residents Served:** 35

**Secured Dementia Care Unit**

**In Home:** No **Area:** **Capacity:** **Residents Served:**

**Hospice**

**Current Residents:** 2

**Number of Residents Who:**

**Receive Supplemental Security Income:** 0 **Are 60 Years of Age or Older:** 35  
**Diagnosed with Mental Illness:** 0 **Diagnosed with Intellectual Disability:** 0  
**Have Mobility Need:** 2 **Have Physical Disability:** 1

**Inspections / Reviews**

10/10/2025 Partial

**Lead Inspector:** [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 10/30/2025

11/03/2025 - POC Submission

**Submitted By:** [REDACTED] **Date Submitted:** 12/01/2025  
**Reviewer:** [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 11/13/2025

Inspections / Reviews *(continued)*

11/12/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/01/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 12/01/2025

12/03/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/01/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

## 25b Contract Signatures

## 1. Requirements

2600.

25.b. The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

## Description of Violation

The resident-home contract, dated [REDACTED], for Resident [REDACTED] was not signed by the resident or designated person.

## Plan of Correction

Accept [REDACTED] - 11/12/2025)

2600.25.b – Contract Signatures

2600.25.b

- Home is unable to retroactively correct this violation from 7/18/24.
- Resident home-contract signed with PCHA and Resident [REDACTED] on 10/28/2025
- Education provided by Executive Director to PCHA on 10/28/2025 on ensuring all resident contracts are signed and completed within 24 hours of admission.
- Audits to be completed starting week of 11/1/25 by PCHA/RCC for 5 residents 1x a month for 4 months to ensure all resident contracts are completed and signed.

Licensee's Proposed Overall Completion Date: 12/01/2025

Implemented [REDACTED] 12/02/2025)

## 42b Abuse

## 2. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

## Description of Violation

Resident [REDACTED] filed a complaint with the home's Administrator on [REDACTED] regarding the concerns the resident has with Staff Member A providing care. Resident [REDACTED] stated Staff Member A is rough while providing care by pushing and pulling on the resident. During transfers, Resident [REDACTED] stated Staff Member A will force the resident down in [REDACTED] chair or the toilet, and as a result, [REDACTED] has landed "hard" on the toilet. Sometime around [REDACTED], Resident [REDACTED] reported Staff Member A got frustrated with the resident and kicked [REDACTED] wheelchair across the room, leaving the resident without access to [REDACTED] wheelchair. Then Staff Member A left the resident's room. Resident [REDACTED] reported not saying anything to Staff Member A regarding this incident due to the fear of how Staff Member A would react. Resident [REDACTED] reported feeling disrespected by Staff Member A and doesn't feel comfortable around Staff Member A.

Resident [REDACTED] stated [REDACTED] has felt disrespected by Staff Member A. Resident [REDACTED] stated Staff Member A is often rushing through their duties on shift and has an "attitude". Resident [REDACTED] stated there was an incident where Staff Member A had not locked the brakes on [REDACTED] wheelchair before assisting the resident with transferring. Resident [REDACTED] told Staff Member A [REDACTED] was concerned with [REDACTED] wheelchair not being in the locked position, and Staff Member A responded by making a face and rolling their eyes at the resident.

Repeated Violation - [REDACTED], et al

## 42b - Abuse (continued)

**Plan of Correction**

Accept [REDACTED] - 11/12/2025)

2600.42.b - Abuse

2600.42.b

- Home is unable to retroactively correct this violation from 10/8/2025
- PCHA/RCC completed initial audit on 10/27/2025 of all residents asking if they feel safe in the home and if they have had any issues with staff members being abusive or rough with them.
- Staff Member A was suspended on 10/8/2025 pending investigation. On 10/10/25 Staff Member A was terminated from employment by PCHA and HR Director.
- Education will be given by PCHA to all Direct Care Staff Members on that a resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way. Education will start 10/28/25 and be completed by 11/7/2025.
- Audits will begin week of 11/3/25 by PCHA/RCC for 2x monthly for 2 months and then 1x a month for 2 months for 10 residents to ensure they feel safe in the home.

Licensee's Proposed Overall Completion Date: 12/01/2025

Implemented [REDACTED] - 12/03/2025)

## 65d - Initial Direct Care Training

**3. Requirements**

2600.

65.d. Direct care staff persons hired after April 24, 2006, may not provide unsupervised ADL services until completion of the following:

1. Training that includes a demonstration of job duties, followed by supervised practice.

**Description of Violation**

Staff Member A, hired on [REDACTED] did not complete the following:

- Training that includes a demonstration of job duties, followed by supervised practice.
- Initial direct care staff person training to include the following:
  - Safe management techniques.
  - ADLs and IADLs
  - Personal hygiene.
  - Care of residents with dementia, mental illness, cognitive impairments, an intellectual disability and other mental disabilities.
  - The normal aging-cognitive, psychological and functional abilities of individuals who are older.
  - Implementation of the initial assessment, annual assessment and support plan.
  - Nutrition, food handling and sanitation.
  - Recreation, socialization, community resources, social services and activities in the community.
  - Gerontology.
  - Staff person supervision, if applicable.
  - Care and needs of residents with special emphasis on the residents being served in the home.
  - Safety management and hazard prevention.
  - Universal precautions.

**65d - Initial Direct Care Training (continued)**

- *The requirements of this chapter.*
- *Infection control.*
- *Care for individuals with mobility needs, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration, if applicable to the residents served in the home.*

**Plan of Correction****Accept** [REDACTED] **- 11/12/2025)**

2600.65.d – Initial Direct Care Training

2600.65.d

- *Home is unable to retroactively correct this violation from 9/23/25.*
- *Orientation/Demonstration of Tasks Checklist created by PCHA and RCC and will be implemented effectively immediately on all new hires that started 10/28/2025 and after.*
- *Staff Member A was terminated from employment on 10/10/25; unable to provide training steps for Staff Member A.*
- *Education provided by Executive Director to PCHA on 10/28/2025 on ensuring all direct care staff have completed the orientation/demonstration checklist prior to hitting the floor solo. PCHA and RCC will ensure that direct care staff are comfortable and are able to perform all tasks/duties as assigned.*
- *Initial Audit of all employees current files will be completed by HR Director on or before 11/24/25.*
- *Audits to be completed starting week of 11/1/25 by PCHA/RCC on all new hires 1x a month for 4 months to ensure all direct care staff persons have completed that orientation/demonstration checklist.*

**Licensee's Proposed Overall Completion Date: 12/01/2025****Implemented** [REDACTED] **- 12/03/2025)**