

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

December 19, 2025

[REDACTED]
SNH PENN TENANT LLC
[REDACTED]

ATTN LICENSING
[REDACTED]

RE: CLARKS SUMMIT SENIOR LIVING
950 MORGAN HIGHWAY
CLARKS SUMMIT, PA, 18411
LICENSE/COC#: 22821

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/19/2025 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: CLARKS SUMMIT SENIOR LIVING **License #:** 22821 **License Expiration:** 01/01/2026
Address: 950 MORGAN HIGHWAY, CLARKS SUMMIT, PA 18411
County: LACKAWANNA **Region:** NORTHEAST

Administrator

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

Legal Entity

Name: SNH PENN TENANT LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 6 **Total Daily Staff:** 97 **Waking Staff:** 73

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 11/19/2025

Inspection Dates and Department Representative

11/19/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 120 **Residents Served:** 85

Secured Dementia Care Unit

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

Hospice

Current Residents: 4

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 85
Diagnosed with Mental Illness: 5 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 6 **Have Physical Disability:** 0

Inspections / Reviews

11/19/2025 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 12/20/2025

12/19/2025 - POC Submission

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

Inspections / Reviews *(continued)*

12/19/2025 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/19/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

225c - Additional Assessment

1. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

2. If the condition of the resident significantly changes prior to the annual assessment.

Description of Violation

Resident # [REDACTED] annual assessment, dated [REDACTED], does not include the following required items:

Transfers: how will staff help with transfers?

Toileting: what kind of help is needed? How will staff assist with this?

Bowel Management: what kind of assistance is needed? What specific help is needed, who will provide this help?

Ambulation: what kind of assistance is needed? Who will provide this help, and how?

Page 5 of the Resident Assessment and Support Plan is entirely blank except for column 1.

Page 7: Dental needs-there is no plan to meet the resident's needs.

Page 10: Orientation is left blank even though a need has been identified.

Page 11: Understanding Instructions. This is blank even though a need has been identified.

Page 12: Summary & Determination-this has been left blank. A response is required.

Plan of Correction

Accept [REDACTED] - 12/19/2025)

- Resident [REDACTED] Resident Assessment and Support Plan (RASP) was reviewed by the Assistant Director of Health and Wellness (ADHW) on 11/19/2025. See attached.
- Missing or incomplete sections were immediately updated on 11/19/2025 to clearly describe:
 - o *Transfers: how will staff help with transfers?*
 - o *Toileting: what kind of help is needed? How will staff assist with this?*
 - o *Bowel Management: what kind of assistance is needed? What specific help is needed, who will provide this help?*
 - o *Ambulation: what kind of assistance is needed? Who will provide this help, and how?*
- Blank sections on Pages 5, 7, 10, 11, and 12 were completed to clearly describe the dental needs, orientation, understanding instructions and any pertinent summary and determination information.
- Each identified need now includes specific interventions, even when assistance is minimal or monitoring only.
- Resident [REDACTED] RASPs was reviewed for accuracy and completeness by ADHW and placed in the resident records on 11/19/2025. See attached
- To prevent future omissions, RASPs will now be reviewed for completeness by the DHW (or designee) prior to finalization.
- Any RASP with identified needs and missing interventions will be returned for correction immediately.
- All required staff will complete training on Regulation §2600.225(c): Required Components of the Resident Assessment and Support Plan (RASP) will be completed by DHW or Designee by 12/18/2025. See attached
- To ensure continued compliance with this regulation, 2 RASP's a week will be audited weekly x 4 weeks then biweekly x 4 weeks then monthly x 1 month starting the week of 12/15/2025 by DHW, ADHW, or Designee. See attached
- Any deficiencies identified will be corrected immediately and addressed with re-education as needed.

Licensee's Proposed Overall Completion Date: 12/18/2025

Implemented [REDACTED] - 12/19/2025)