

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

February 10, 2026

[REDACTED]
PRESBYTERIAN SENIOR CARE INC
[REDACTED]
[REDACTED]

RE: WOODSIDE PLACE OF OAKMONT
1215 HULTON ROAD
OAKMONT, PA, 15139
LICENSE/COC#: 42973

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/13/2026 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: WOODSIDE PLACE OF OAKMONT **License #:** 42973 **License Expiration:** 08/02/2026
Address: 1215 HULTON ROAD, OAKMONT, PA 15139
County: ALLEGHENY **Region:** WESTERN

Administrator

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

Legal Entity

Name: PRESBYTERIAN SENIOR CARE INC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: **Total Daily Staff:** 72 **Waking Staff:** 54

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint, Incident **Exit Conference Date:** 01/13/2026

Inspection Dates and Department Representative

01/13/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 37 **Residents Served:** 36

Secured Dementia Care Unit

In Home: Yes **Area:** Entire home **Capacity:** 37 **Residents Served:** 36

Hospice

Current Residents: 3

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 36
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 36 **Have Physical Disability:** 0

Inspections / Reviews

01/13/2026 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 01/24/2026

01/26/2026 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 02/06/2026
Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 01/30/2026

Inspections / Reviews *(continued)*

02/02/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/06/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 02/06/2026

02/10/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/06/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

233c - Key-Locking Devices

1. Requirements

2600.

233.c. If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

Description of Violation

At 9:36am, an agent of the Department entered the code posted at the emergency exit door next to bedroom [redacted] in the "Star House" hallway; however, the keypad would not unlock and disengage the door's locking mechanism.

REPEAT VIOLATION: [redacted], et. al.

Plan of Correction

Directed [redacted] 02/02/2026)

On 1/13/26, Maintenance Director checked door. The keypad was shorting out and would only work inconsistently to go outside from the back of star house courtyard door. The keypad did work appropriately coming in. Complete checks for all door keypads was conducted by administrator on 1/13/25 and 1/20/25. Door keypads will continue to be checked weekly for 3 months then monthly by administrator during safety rounds. A sign was temporarily put on the star house door to let visitors know to see a team member for a job to be let out that courtyard door. Maintenance Director called M & P security to order a new keypad and for installment on 1/13/25. A return call on 1/19/25 and follow up emails attached confirms that keypad is ordered and a work order was entered. M & P Security solutions was onsite on Thursday 1/29/2025 to complete installation of the new keypad. Administrator began weekly checks on all doors on 1/13/25 to make sure they are operational and that the password instructions are posted. Beginning March 13th, these checks will be done by administrator monthly.

Proposed Overall Completion Date: 03/13/2026

Directed Completion Date: 02/06/2026

Implemented [redacted] - 02/10/2026)