

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

February 3, 2026

[REDACTED]  
THE ARBORS AT ST BARNABAS INC  
[REDACTED]  
[REDACTED]

RE: THE ARBORS AT ST. BARNABAS  
85 CHARITY PLACE  
VALENCIA, PA, 16059  
LICENSE/COC#: 42309

[REDACTED],  
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 01/23/2026 of the above facility, no regulatory citations have been identified as a result of this inspection.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,  
[REDACTED]

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: *THE ARBORS AT ST. BARNABAS* License #: *42309* License Expiration: *11/10/2026*  
 Address: *85 CHARITY PLACE, VALENCIA, PA 16059*  
 County: *BUTLER* Region: *WESTERN*

**Administrator**

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

**Legal Entity**

Name: *THE ARBORS AT ST BARNABAS INC*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *103* Waking Staff: *77*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #: [REDACTED]  
 Reason: *Complaint, Incident* Exit Conference Date: *01/23/2026*

**Inspection Dates and Department Representative**

*01/23/2026 - On-Site* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *229* Residents Served: *72*

**Secured Dementia Care Unit**  
 In Home: *Yes* Area: *Memory Care* Capacity: *47* Residents Served: *14*

**Hospice**  
 Current Residents: *15*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *71*  
 Diagnosed with Mental Illness: *2* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *31* Have Physical Disability: *0*

**Inspections / Reviews**

*01/23/2026 Partial*  
 Lead Inspector: [REDACTED] Follow-Up Type: *Not Required*

NO DEFICIENCIES FOUND