

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

February 18, 2026

[REDACTED]  
ADVANCED PERSONAL CARE HOME INC  
[REDACTED]  
[REDACTED]

RE: ADVANCED PERSONAL CARE HOME  
245 CENTER STREET, PO BOX 5  
CLARKSVILLE, PA, 15322  
LICENSE/COC#: 44048

[REDACTED],  
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 02/18/2026 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:** ADVANCED PERSONAL CARE HOME      **License #:** 44048      **License Expiration:** 12/15/2026  
**Address:** 245 CENTER STREET, PO BOX 5, CLARKSVILLE, PA 15322  
**County:** GREENE      **Region:** WESTERN

**Administrator**

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

**Legal Entity**

**Name:** ADVANCED PERSONAL CARE HOME INC  
**Address:** [REDACTED]  
**Phone:** [REDACTED]      **Email:** [REDACTED]

**Certificate(s) of Occupancy**

**Type:** C-2 LP      **Date:** 11/16/1992      **Issued By:** L&I

**Staffing Hours**

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

**Inspection Information**

**Type:** Partial      **Notice:** Unannounced      **BHA Docket #:**  
**Reason:** Complaint, Incident      **Exit Conference Date:** 02/18/2026

**Inspection Dates and Department Representative**

02/18/2026 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 39      **Residents Served:** 34

**Secured Dementia Care Unit**

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

**Hospice**

**Current Residents:** 1

**Number of Residents Who:**

**Receive Supplemental Security Income:** 28      **Are 60 Years of Age or Older:** 22  
**Diagnosed with Mental Illness:** 30      **Diagnosed with Intellectual Disability:** 2  
**Have Mobility Need:** 3      **Have Physical Disability:** 2

**Inspections / Reviews**

02/18/2026 Partial

**Lead Inspector:** [REDACTED]      **Follow-Up Type:** Not Required

**NO DEFICIENCIES FOUND**