

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

April 29, 2026

[REDACTED], ADMINISTRATOR  
HATFIELD MENNONITE HOME  
2343 BETHLEHEM PIKE  
HATFIELD, PA, 19440

RE: THE WILLOWS OF LIVING  
BRANCHES  
2343 BETHLEHEM PIKE  
HATFIELD, PA, 19440  
LICENSE/COC#: 12678

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/09/2026, 03/10/2026 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: THE WILLOWS OF LIVING BRANCHES License #: 12678 License Expiration: 08/19/2026  
 Address: 2343 BETHLEHEM PIKE, HATFIELD, PA 19440  
 County: BUCKS Region: SOUTHEAST

**Administrator**

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

**Legal Entity**

Name: HATFIELD MENNONITE HOME  
 Address: 2343 BETHLEHEM PIKE, HATFIELD, PA, 19440  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: Other Date: 01/28/1986 Issued By: L & I

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 52 Waking Staff: 39

**Inspection Information**

Type: Full Notice: Unannounced BHA Docket #:  
 Reason: Renewal Exit Conference Date: 03/09/2026

**Inspection Dates and Department Representative**

03/09/2026 - On-Site: [REDACTED]  
 03/10/2026 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 80 Residents Served: 52  
 Secured Dementia Care Unit  
 In Home: No Area: Capacity: Residents Served:  
 Hospice  
 Current Residents: 1  
 Number of Residents Who:  
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 52  
 Diagnosed with Mental Illness: 3 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 0 Have Physical Disability: 0

**Inspections / Reviews**

03/09/2026 Full  
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 04/13/2026  
 04/10/2026 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: 04/28/2026  
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 05/02/2026

Inspections / Reviews *(continued)*

04/29/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/28/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

## 54b - Staff Under 18 Years

## 1. Requirements

2600.

54.b. An individual who is 16 or 17 years of age may be a staff person at a home, but may not perform tasks related to medication administration. A staff person who is 16 or 17 years of age may not perform tasks related to incontinence care, bathing or dressing of residents without supervision.

## Description of Violation

On 2/27/2026 and 2/28/2026 from 6:00 p.m. to 10:00 p.m., direct care staff person A, [REDACTED] performed tasks related to incontinence care, bathing, or dressing of residents without supervision.

## Plan of Correction

Accept ( [REDACTED] - 04/10/2026)

On 3/10/26, Care Coordinator took immediate action by contacting CNA to inform [REDACTED] that due to [REDACTED] age [REDACTED] may not perform tasks related to incontinence care, bathing or dressing of residents without supervision. CNA was taken off all upcoming nursing shifts.

On 3/11/26, Care Coordinator and PC Director contacted CNA to provide alternate options of work within Living Branches based on [REDACTED] age and qualifications. On 3/11/26 Care Coordinator began paperwork for [REDACTED] to transition to Dining Services.

On 3/12/26, HR ran report to identify if there were any other underage CNA's at The Willows and found none.

On 3/12/26 HR updated their application for candidates in the CNA program to reflect age and DHS requirement.

On 3/12/26 Clinical educator updated power point information session for CNA's with age requirement in personal care setting.

On 4/8/26 PC Director requested HR to run a report for the next three months to audit for any underage CNA's. PC Director will report audit findings at QAPI meetings for three months starting with the May 19th, 2026 meeting.

Licensee's Proposed Overall Completion Date: 04/10/2026

Implemented ( [REDACTED] - 04/29/2026)

## 65g - Annual Training Content

## 2. Requirements

2600.

65.g. Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:

1. Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert. Videos prepared by a fire safety expert are acceptable for the training if accompanied by an onsite staff person trained by a fire safety expert.
2. Emergency preparedness procedures and recognition and response to crises and emergency situations.
3. Resident rights.
4. The Older Adult Protective Services Act (35 P.S. § § 10225.101—10225.5102).
5. Falls and accident prevention.
6. New population groups that are being served at the home that were not previously served, if applicable.

## Description of Violation

Staff person B did not receive training in fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert during training year 2025.

## Plan of Correction

Accept ( [REDACTED] - 04/10/2026)

On 3/18/26 PC Director scheduled fire safety training for staff and regularly scheduled volunteers. Trainings scheduled are 4/2/26, 4/9/26, 4/23/26.

On 3/20/26 PC Director met with Volunteer Coordinator to review list of regularly scheduled volunteers at The Willows and invited them to upcoming trainings.

**65g Annual Training Content (continued)**

On 3/24/26 PC Director, who has been trained by fire safety expert (4/30/25) met with staff person B (regularly scheduled volunteer) to provide fire safety training.

On 4/2/26 PC Director was trained by the fire safety expert. [REDACTED] will attend training annually.

On 4/23/26 Volunteer Coordinator will attend fire safety training by the fire safety expert. [REDACTED] will attend training annually.

On 4/8/26 PC Director requested a monthly report from the Volunteer Coordinator for the next 3 months for all regularly scheduled volunteers at The Willows. PC Director will report audit findings at QAPI meetings for three months, starting with the May 19, 2026 meeting.

Licensee's Proposed Overall Completion Date: 04/30/2026

Implemented ([REDACTED]) - 04/29/2026)

**132g - Fire Drills Days/Times****3. Requirements**

2600.

132.g. Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

**Description of Violation**

The fire drills conducted in May, June, and July were all on Wednesday.

**Plan of Correction**

Accept ([REDACTED]) - 04/10/2026)

On 3/11/26 Facilities Maintenance Coordinator and PC Director reviewed and adjusted 2026 fire drill schedule to ensure there are no patterns in the schedule.

On 3/12/26 Facilities Maintenance Coordinator provided a new template that will be used going forward to schedule fire drills. The new template added the day of week so that any patterns can be easily identified.

Facilities Maintenance Coordinator and PC Director will be responsible for reviewing schedule monthly and making sure there are no patterns.

Licensee's Proposed Overall Completion Date: 04/10/2026

Implemented ([REDACTED]) - 04/29/2026)

**252 - Record Content****4. Requirements**

2600.

252. Content of Resident Records - Each resident's record must include the following information:

1. Name, gender, admission date, birth date and Social Security number.
2. Race, height, weight, color of hair, color of eyes, religious affiliation, if any, and identifying marks.
3. A photograph of the resident that is no more than 2 years old.
4. Language or means of communication spoken or used by the resident.
5. The name, address, telephone number and relationship of a designated person to be contacted in case of an emergency.
6. The name, address and telephone number of the resident's physician or source of health care.

252 - Record Content (*continued*)

7. The current and previous 2 years' physician's examination reports, including copies of the medical evaluation forms.
8. A list of prescribed medications, OTC medications and CAM.
9. Dietary restrictions.
10. A record of incident reports for the individual resident.
11. A list of allergies.
12. The documentation of health care services and orders, including orders for the services of visiting nurse or home health agencies.
13. The preadmission screening, initial intake assessment and the most current version of the annual assessment.
14. A support plan.
15. Applicable court order, if any.
16. The resident's medical insurance information.
17. The date of entrance into the home, relocations and discharges, including the transfer of the resident to other homes owned by the same legal entity.
18. An inventory of the resident's personal property as voluntarily declared by the resident upon admission and voluntarily updated.
19. An inventory of the resident's property entrusted to the administrator for safekeeping.
20. The financial records of residents receiving assistance with financial management.
21. The reason for termination of services or transfer of the resident, the date of transfer and the destination.
22. Copies of transfer and discharge summaries from hospitals, if available.
23. If the resident dies in the home, a copy of the official death certificate.
24. Signed notification of rights, grievance procedures and applicable consent to treatment protections specified in § 2600.41 (relating to notification of rights and complaint procedures).
25. A copy of the resident-home contract.
26. A termination notice, if any.

**Description of Violation**

*Resident 1's record does not include a photograph of the resident that is no more than 2 years old.*

**Plan of Correction**

Accept (█ - 04/10/2026)

*On 3/11/26 PC Director completed a photo audit on all residents.*

*On 3/13/26 Life Enrichment took a new photo of resident 1 and Administrative Assistant uploaded the photo into Point Click Care for █ face sheet.*

*On 3/13/26 Life Enrichment sent flyer to invite all residents to photo sessions on 3/23/26 and 3/27/26 to have their photos retaken for their files.*

*3/27/26 PC Director completed a photo audit.*

*On 4/6/26 Administrative Assistant uploaded photos for all current residents into Point Click Care for their face sheet. Compliance met for all current residents for a photo that is no more than 2 years old.*

*On 4/6/26 PC Director sent Administrative Assistant and Life Enrichment a calendar invite reminder for new photos to be taken in January 2028.*

**Licensee's Proposed Overall Completion Date: 04/10/2026**

Implemented (█ - 04/29/2026)