

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

May 15, 2026

[REDACTED], OWNER  
SHERRY STOCKDALE  
[REDACTED]

RE: BACK TO BASICS PERSONAL CARE  
215 SLAUGHTERHOUSE ROAD  
DAYTON, PA, 16222  
LICENSE/COC#: 42718

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/16/2026 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: *BACK TO BASICS PERSONAL CARE* License #: *42718* License Expiration: *05/11/2026*  
 Address: *215 SLAUGHTERHOUSE ROAD, DAYTON, PA 16222*  
 County: *ARMSTRONG* Region: *WESTERN*

**Administrator**

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

**Legal Entity**

Name: *SHERRY STOCKDALE*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *R-4* Date: *08/03/2011* Issued By: *Wayne Twp.*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *15* Waking Staff: *11*

**Inspection Information**

Type: *Full* Notice: *Unannounced* BHA Docket #:  
 Reason: *Renewal* Exit Conference Date: *03/16/2026*

**Inspection Dates and Department Representative**

*03/16/2026 - On-Site:* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *16* Residents Served: *14*

**Secured Dementia Care Unit**  
 In Home: *No* Area: Capacity: Residents Served:

**Hospice**  
 Current Residents: *2*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *3* Are 60 Years of Age or Older: *14*  
 Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *1* Have Physical Disability: *0*

**Inspections / Reviews**

**03/16/2026 Full**  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/03/2026*

**04/07/2026 - POC Submission**  
 Submitted By: [REDACTED] Date Submitted: *05/11/2026*  
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *04/24/2026*

Inspections / Reviews *(continued)*

05/15/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/11/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

## 132c - Fire Drill Records

## 1. Requirements

2600.

132.c. A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

## Description of Violation

The home's fire drill record did not indicate the time of the fire drills or the exit routes used on multiple dates to include: 11/7/25, 10/1/25, 9/4/25, 8/9/25, 5/7/25.

## Plan of Correction

Accept (█) - 04/07/2026)

After the exit interview on 3/16/2026, the administrator reviewed the fire drill records in question, and had a meeting with the asst. administrator concerning the pending violations. On 3/24/2026 the administrator met with the asst. administrator and reviewed reg. 2600.132.c. It was discussed the importance of proper fire drill documentation and not the "shorthand" version that was used on 5 different occasions. To further express this importance, the administrator said █ was going to "spank" █ on the a\*\* five times. To my surprise █ response was, " Oooo that might hurt so good!! " so I shelved the idea.

Beginning 04/01/2026 the administrator will review all future fire drill documentation to insure all necessary requirements are satisfied to be in compliance with stated regulation. The administrator will document the date, time, and initial when the review took place.

Licensee's Proposed Overall Completion Date: 04/01/2026

Implemented (█) - 05/15/2026)

## 183d - Prescription Current

## 2. Requirements

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

## Description of Violation

There was a box containing a Stiolto Respimat inhaler labeled for resident #1, however, this medication is not currently prescribed to the resident.

## Plan of Correction

Accept (█) - 04/07/2026)

On 03/16/2026 the administrator disposed of the discontinued stiolto respimat inhaler. On 03/17/2026, administrator had a meeting with staff responsible for med administration on the morning shift, to discuss why the discontinued inhaler was not disposed of, and the status of the current prescribed Tiotropium inhaler. Staff assured administrator, the stiolto inhaler was not being given, and the currently prescribed Tiotropium inhaler was being given as prescribed. Some confusion arose as to the status of the Stiolto inhaler, since the facility had not received a discontinue order from the PCP (Veterans Administration). The old medication was not given, but also was not disposed of, pending a discontinue order from the PCP (Veterans Administration). To obtain information from the VA is quite involved. The facility is unable to obtain information from the VA concerning a resident veteran. That request must go thru the veteran, who must file a R.O.I (request of information). This must be done in person or by mail. It cannot be done via phone or text. Veteran must request a ROI form be mailed. Resident veteran must sign and return, by mail, the original form (not a copy). The VA will then mail the requested information to the veteran who will then give it to the facility. Resident #1 requested this information on 03/18/26 and is currently waiting for the information to arrive.

**183d - Prescription Current (continued)**

*Beginning 04/01/2026, asst. administrator, will review med cart monthly, to insure discontinued meds are properly disposed of and document any discrepancies.*

**Licensee's Proposed Overall Completion Date: 04/01/2026**

**Implemented (█ - 05/15/2026)**

**187a - Medication Record****3. Requirements**

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

**Description of Violation**

*Resident #1 is prescribed Tiotropium 2.5mcg/Actuat 60d oral inhalation – inhale 2 inhalations by mouth every day. However, this medication is not recorded on the resident's March 2026 medication administration record (MAR)*

*Resident #1's March 2026 medication administration record (MAR) indicates Stiolto AER 2.5mg-2.5mg – Inhale 2 puffs orally daily*

*Repeat Violation: 3/7/25*

**Plan of Correction**

**Accept (█ - 04/07/2026)**

*See attached. On 03/17/2026 the administrator met with the staff responsible for administering morning meds. It was found the staff was improperly documenting, on the MAR, the prescribed medication of Tiotropium (Spiriva) inhaler. Although the Tiotropium inhaler was being given as prescribed, it was being documented as Stiolto inhaler, due to the fact the MAR entry of Stiolto was not properly discontinued from a previous script. The issue of not properly discontinuing the Stiolto inhaler was exacerbated by the disconnect between, the facility and the VA, where resident #1 gets █ medication. There is limited information exchange between the VA and the personal care home facility. All information is dependent upon ROI (release of information) at the request of the veteran and must be done in person or by mail. The facility did not receive a discontinue order for the Stiolto inhaler, from the VA, which can result in confusion of what to do and when to do it.*

*Beginning 04/01/2026 the asst. administrator and the morning med staff will review MAR entries when the monthly MAR's arrive from the pharmacy and document and address any issues.*

**Licensee's Proposed Overall Completion Date: 04/01/2026**

**Implemented (█ - 05/15/2026)**