

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

April 24, 2026

[REDACTED]
RONALD E INSINGER
[REDACTED]
[REDACTED]

RE: INSINGER'S PERSONAL CARE-
SOUTH
6 EAST CENTRAL AVENUE
SOUTH WILLIAMSPORT,, PA, 17702
LICENSE/COC#: 20209

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/25/2026 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information		
Name: <i>INSINGER'S PERSONAL CARE-SOUTH</i>	License #: <i>20209</i>	License Expiration: <i>11/26/2026</i>
Address: <i>6 EAST CENTRAL AVENUE, SOUTH WILLIAMSPORT,, PA 17702</i>		
County: <i>LYCOMING</i>	Region: <i>NORTHEAST</i>	

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

Legal Entity		
Name: <i>RONALD E INSINGER</i>		
Address: [REDACTED]		
Phone: [REDACTED]	Email: [REDACTED]	

Certificate(s) of Occupancy		
Type: <i>I-1</i>	Date: <i>03/06/2009</i>	Issued By: <i>L&I</i>

Staffing Hours		
Resident Support Staff: <i>0</i>	Total Daily Staff: <i>28</i>	Waking Staff: <i>21</i>

Inspection Information		
Type: <i>Partial</i>	Notice: <i>Unannounced</i>	BHA Docket #:
Reason: <i>Incident</i>	Exit Conference Date: <i>03/25/2026</i>	

Inspection Dates and Department Representative	
<i>03/25/2026 - On-Site:</i>	[REDACTED]

Resident Demographic Data as of Inspection Dates			
General Information			
License Capacity: <i>38</i>		Residents Served: <i>28</i>	
Secured Dementia Care Unit			
In Home: <i>No</i>	Area:	Capacity:	Residents Served:
Hospice			
Current Residents: <i>0</i>			
Number of Residents Who:			
Receive Supplemental Security Income: <i>23</i>		Are 60 Years of Age or Older: <i>22</i>	
Diagnosed with Mental Illness: <i>19</i>		Diagnosed with Intellectual Disability: <i>5</i>	
Have Mobility Need: <i>0</i>		Have Physical Disability: <i>1</i>	

Inspections / Reviews		
03/25/2026 Partial		
Lead Inspector: [REDACTED]	Follow-Up Type: <i>POC Submission</i>	Follow-Up Date: <i>04/24/2026</i>
04/17/2026 - POC Submission		
Submitted By: [REDACTED]	Date Submitted: <i>04/23/2026</i>	
Reviewer: [REDACTED]	Follow-Up Type: <i>POC Submission</i>	Follow-Up Date: <i>04/24/2026</i>

Inspections / Reviews (*continued*)

04/20/2026 POC Submission

Submitted By: [REDACTED] Date Submitted: 04/23/2026

Reviewer: [REDACTED] Follow Up Type: Document Submission Follow Up Date: 05/01/2026

04/24/2026 Document Submission

Submitted By: [REDACTED] Date Submitted: 04/23/2026

Reviewer: [REDACTED] Follow Up Type: Not Required

15a - Resident Abuse Report

1. Requirements

2600.

15.a. The residence shall immediately report suspected abuse of a home served in the resident's in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

On [REDACTED], Resident [REDACTED] reported to Staff that Resident [REDACTED] put their hands down the pants of resident [REDACTED]. This incident was reported to staff on [REDACTED] at 1:30p.m. However, an Act 13 was not reported immediately to the Area Agency on Aging.

Plan of Correction

Accept [REDACTED] 04/20/2026)

Administrator called Area Agency on Aging and verbally told what Resident [REDACTED] did to Resident [REDACTED]. However the Administrator was unaware that an Act 13 also needed to be completed. After the inspector told the Administrator that an Act 13 needed to be completed the administrator completed and faxed an Act 13 to Area Agency on Agency on March 25th 2026. Going forward the Administrator will now complete an Act 13 after reporting the suspected abuse. Please see attachment for completed Act 13 form and fax log.

Licensee's Proposed Overall Completion Date: 04/17/2026

Implemented [REDACTED] - 04/24/2026)

42b - Abuse

2. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [REDACTED], Resident [REDACTED] was sitting on a couch in the home. Resident [REDACTED] came over and sat next to Resident [REDACTED]. Resident [REDACTED] then put their hand down the pants of Resident [REDACTED] and began touching them. Resident [REDACTED] told Resident [REDACTED] to stop and that it hurt but they kept doing it. The home issued Resident [REDACTED] a 30-day notice based upon the incident.

Plan of Correction

Directed [REDACTED] - 04/20/2026)

-The Administrator was under the impression that when a resident broke the law or home rules that the home had a right to issue a 30-day notice. However, the inspector told the Administrator that the resident needs to be corrected first and then if the behavior happens a second time, then a 30-day notice could be issued. Going forward now that the Administrator knows this, the home will never issue a 30-day notice based upon a first incident of breaking the rules. See the attached letter notifying Resident [REDACTED] on 4/14/26 that [REDACTED] has the right to stay in the home which was signed by both Resident [REDACTED] and the Administrator. The home also has a training to go over Resident Rights on 5/1/26 at 9:30am with the local ombudsman here at the personal care home with the Administrator and all the staff.

Proposed Overall Completion Date: 04/17/2026

Directed: In addition to the above plan of correction, the administrator or designee will evaluate all resident supervision needs and provide the supervision needed to meet each resident's needs. Resident 2 will be counseled on home rules including the consequences of repeated violations.

42b Abuse (continued)

Directed Completion Date: 05/01/2026

Implemented (█ - 04/24/2026)

224a - Preadmission Screen Form

3. Requirements

2600.

224.a. A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

Description of Violation

Resident █ preadmission screening form, dated █, does not include a determination that the needs of the resident can be met by the services provided by the home.

Plan of Correction

Directed (█ 04/20/2026)

The needs of Resident █ can be met by the home. The Administrator will in the future have █ manager overlook all the prescreening documents to ensure that they are filled out in their entirety the same day a prescreening form is completed for any potential residents by the administrator. The prescreening form was fixed on 3/26/2026 by the Administrator. Please see the attachment for the form showing the manager now knows █ will be double checking all prescreening forms in the future and the corrected prescreening form.

Proposed Overall Completion Date: 04/17/2026

Directed: In addition to the above plan of correction, the administrator or designee will audit all resident pre-admission screening forms and check for required information. Any identified issues will be corrected within 24 hours. Documentation of audit will be provided to the department.

Directed Completion Date: 04/24/2026

Implemented (█ - 04/24/2026)

225a - Assessment 15 Days

4. Requirements

2600.

225.a. A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

Description of Violation

Resident █'s assessment, dated █, does not include description of service need for eating, drinking, transferring in/out of bed/chair, toileting, bowel management, turning and repositioning in bed/chair, caring for person/possessions, writing correspondence, engaging in social activities.

Plan of Correction

Directed (█ - 04/20/2026)

Administrator marked A for the services themselves stating that resident █ did not need the above said services but did not mark N/A for the said services. The administrator thought it was fine not to check the N/A boxes due to no services needed. Going forward in the future the Administrator will mark N/A for services when marking A for no services needed. The RASP was corrected on 3/26/26 by the Administrator. Please see attachment for the corrected RASP. The Administrator also made a RASP checklist on 4/16/26 to help with remembering to fill out all the

225a Assessment 15 Days (continued)

information needed on the RASP. Please see attachment for RASP checklist.

Proposed Overall Completion Date: 04/17/2026

Directed: In addition to the above plan of correction, the administrator or designee will audit all resident RASPs and ensure they are completed in full and accurate. Any identified issues will be corrected within 24 hours. Documentation of audit will be provided to the department.

Directed Completion Date: 04/24/2026

Implemented (█ - 04/24/2026)

228h - Grounds Discharge/Transfer**5. Requirements**

2600.

228.h. The only grounds for discharge or transfer of a resident from a home are for the following conditions:

7. Documented, repeated violation of the home rules.

Description of Violation

On █ the home issued a 30 day notice to discharged resident █ against the resident's will. The reason for the 30 day notice was due to inappropriate behavior that no steps were taken by the home to address prior to the discharge notice.

Plan of Correction

Accept (█ - 04/17/2026)

Administrator was under the impression that when a resident broke the law and/ or broke the law that the home was within their right to issue a 30 day notice as presented in the home rules. However the inspector told the Administrator that the resident has to be corrected first and if they commit the same act then a 30 day notice could then be issued. Now that the inspector clarified this going forward the home will never issue a 30 day notice for a first offense of breaking the home rules. The administrator did correct Resident █ verbally the day the incident happened but on 4/15/26 also decided to address █ bad behavior with a letter as well for documentation. The Administrator also rescinded the 30 day notice. Both the 30 day notice and the letter apprising Resident #2 of █ bad behavior has been signed and dated by resident █

Licensee's Proposed Overall Completion Date: 04/15/2026

Implemented (█ 04/24/2026)