

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

April 15, 2026

[REDACTED]
THE PARK HOME
[REDACTED]

RE: THE MEADOWS, A PERSONAL CARE
COMMUNITY
2160 WARRENSVILLE ROAD
MONTOURSVILLE, PA, 17754
LICENSE/COC#: 22596

[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: *THE MEADOWS, A PERSONAL CARE COMMUNITY* License #: 22596 License Expiration: 06/25/2026
 Address: 2160 WARRENSVILLE ROAD, MONTOURSVILLE, PA 17754
 County: LYCOMING Region: NORTHEAST

Administrator

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

Legal Entity

Name: *THE PARK HOME*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: 01/04/1995 Issued By: *L&I*

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 42 Waking Staff: 32

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: 03/25/2026

Inspection Dates and Department Representative

03/25/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 64 Residents Served: 42
 Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:
 Hospice
 Current Residents: 2
 Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 42
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

03/25/2026 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: 04/19/2026

04/15/2026 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 04/15/2026
 Reviewer: [REDACTED] Follow-Up Type: *Bypass Document Submission*

Inspections / Reviews *(continued)*

04/15/2026 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/15/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

16c - Written Incident Report

1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department’s personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

The following medications were not administered to Resident [redacted] as prescribed and were not reported to the Department until [redacted]:

- [redacted]
- [redacted]
- [redacted]
- [redacted]
- [redacted]

Plan of Correction

Accept [redacted] - 04/15/2026)

IMMEDIATE ACTION/TRAINING: Med errors reported to Department 3/26/2026 (initial) and 3/30/2026 (final).

Reeducation of 2600.16 for all personal care/med tech staff, completed 3/26/2026.

ONGOING ACTION/TRAINING: Personal Care Supervisor and Administrator will monitor MARs – daily x 2 weeks, then weekly x 4 weeks, then monthly. Checks will be documented.

WHO IS RESPONSIBLE: [redacted] Personal Care Supervisor / [redacted] Administrator

TARGET DATE: 4/30/2026

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

Implemented [redacted] - 04/15/2026)

185a - Implement Storage Procedures

2. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

The homes policy on medication disposal states that two people must witness the disposal of all outdated or discontinued medications. Staff Person A stated that on [redacted] they destroyed the medication alone and did not ask another staff member to assist.

Plan of Correction

Accept [redacted] - 04/15/2026)

IMMEDIATE ACTION/TRAINING: Reeducation of 2600.185 and 'Medication Storage and Disposal' Policy for all personal care/med tech staff, completed 3/26/2026.

ONGOING ACTION/TRAINING: Disposal logs have been in place since incident occurred in February 2026 – will continue to utilize. Review of disposal logs to ensure proper utilization – weekly x 4 weeks, then monthly. Checks will be documented.

WHO IS RESPONSIBLE: [redacted] Personal Care Supervisor / [redacted] Administrator

TARGET DATE: 4/30/2026

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

185a Implement Storage Procedures (*continued*)

Implemented [REDACTED] - 04/15/2026)

187d Follow Prescriber's Orders

3. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident [REDACTED] is prescribed compression stocking on in the morning and off in the evening, [REDACTED] patch daily on for 12 hours and off for 12 hours. However, resident # [REDACTED] was not administered these medications on the following dates:

- [REDACTED]
- [REDACTED]

Resident [REDACTED] is prescribed [REDACTED] 3 times a day, [REDACTED], [REDACTED] twice daily. However, these medication was not administered to resident on the following dates because the medication was not available in the home:

- [REDACTED]
- [REDACTED]
- [REDACTED]

Plan of Correction

Accept [REDACTED] - 04/15/2026)

IMMEDIATE ACTION/TRAINING: Reeducation of 2600.187 for all personal care/med tech staff, completed 3/26/2026.

ONGOING ACTION/TRAINING: Personal Care Supervisor and Administrator will monitor MARs for any refusals or unadministered medications – daily x 2 weeks, then weekly x 4 weeks, then monthly. Checks will be documented.

WHO IS RESPONSIBLE: [REDACTED] Personal Care Supervisor / [REDACTED] Executive Director

TARGET DATE: 4/30/2026

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

Implemented [REDACTED] 04/15/2026)

188b Medication Error Reporting

4. Requirements

2600.

188.b. A medication error shall be immediately reported to the resident, the resident's designated person and the prescriber.

Description of Violation

The following medications were not administered to Resident [REDACTED] as prescribed and were not reported to the physician:

188b - Medication Error Reporting (continued)

[Redacted]

Plan of Correction

Accept [Redacted] - 04/15/2026)

IMMEDIATE ACTION/TRAINING: Department, Resident, Designated Person and Prescriber notified 3/26/2026.

Reeducation of 2600.188 for all personal care/med tech staff, completed 3/26/2026.

ONGOING ACTION/TRAINING: Personal Care Supervisor and Administrator will monitor MARs – daily x 2 weeks, then weekly x 4 weeks, then monthly. Checks will be documented.

WHO IS RESPONSIBLE: [Redacted] Personal Care Supervisor / [Redacted] Executive Director

TARGET DATE: 4/30/2026

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

Implemented [Redacted] - 04/15/2026)