



Pennsylvania
Department of Human Services

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: APRIL 30, 2026

[REDACTED]
Ark Manor LLC
105 Sandra Drive
Delmont, Pennsylvania 15626

RE: Ark Manor
License #: 44686

Dear [REDACTED]:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspection on April 7, 2026 of the above facility that is operating pending an appeal, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Licensing Inspection Summary were found.

Correction of these violations in accordance with the specified plan of correction is required. Failure to correct these violations may result in further licensing enforcement action.

Sincerely,

Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosure
Licensing Inspection Summary

Facility Information

Name: ARK MANOR **License #:** 44686 **License Expiration:** 01/26/2025
Address: 105 SANDRA DRIVE, DELMONT, PA 15626
County: WESTMORELAND **Region:** WESTERN

Administrator

Name: [REDACTED]

Legal Entity

Name: ARK MANOR LLC
Address: 105 SANDRA DRIVE, DELMONT, PA, 15626
Phone: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 35 **Waking Staff:** 26

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint, Monitoring **Exit Conference Date:** 04/07/2026

Inspection Dates and Department Representative

04/07/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 70 **Residents Served:** 33

Secured Dementia Care Unit

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

Hospice

Current Residents: 1

Number of Residents Who:

Receive Supplemental Security Income: 25 **Are 60 Years of Age or Older:** 30
Diagnosed with Mental Illness: 18 **Diagnosed with Intellectual Disability:** 3
Have Mobility Need: 2 **Have Physical Disability:** 1

Inspections / Reviews

04/07/2026 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:**

83a - Indoor Temperature

1. Requirements

2600.

83.a. The indoor temperature, in areas used by the residents, must be at least 70°F when residents are present in the home.

Description of Violation

At 9:37 AM the temperature in the blue hallway was 61 degrees Fahrenheit, and at 9:50 AM the temperature in bedroom [REDACTED] was 62.6 degrees Fahrenheit.

REPEAT VIOLATION: 12/5/26 et. al.

Plan of Correction

Directed [REDACTED] - 04/27/2026)

Within 5 days of receipt of the plan of correction: The administrator or designee shall diagnose the reason for the colder temperature in the blue hallway and take corrective action to ensure the temperature of all areas on the home used by residents is at least 70 degrees Fahrenheit. Corrective measures can include turning up the thermostat for that area of the home, Weather sealing windows and any other areas letting in outside drafts, fully opening all heating vents in resident #3's bedroom, or contacting a professional heating/cooling company to diagnose and correct the heating issue. Documentation of the corrective measures shall be kept.

Within 10 days of receipt of the plan of correction and at least weekly thereafter: A designated staff person shall check all areas of the home used by the residents to ensure the temperature is at least 70 degrees Fahrenheit

Within 10 days of receipt of the plan of correction: All staff persons will be educated on this regulation and the home's plan to ensure all areas of the home used by the residents are at least 70 degrees Fahrenheit.

85a - Sanitary Conditions

2. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

At 9:43 AM there was a pool of urine on the floor and a strong smell of urine in bedroom [REDACTED].

At 9:30 AM there was a strong smell of urine in bedroom # [REDACTED]

At 10:33 AM there was feces on the bedsheets, feces on the toilet sheet, and feces on the outside of the toilet in bedroom # [REDACTED]

REPEAT VIOLATION: 3/12/25 et. al., 12/5/25 et. al.

Plan of Correction

Directed [REDACTED] - 04/27/2026)

Within 2 days of receipt of the plan of correction: The administrator or designee shall fully correct all of the unsanitary issued cited. The cleaning of these areas shall continue to the extent that there are no lingering odors.

Within 5 days of receipt of the plan of correction and daily thereafter: The Administrator or designee shall check all areas of the home to ensure sanitary conditions are maintained, including the absence of any foul odors.

85a Sanitary Conditions (continued)

Within 15 days of receipt of the plan of correction: The Administrator or designee shall review the incontinence care needs of all residents including resident support plans to ensure all residents who require incontinence care are receiving this care and that the required care is included in the support plan.

183d - Prescription Current**3. 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

Lorazepam 2 mg/ml that expired on 6/24/25 and Morphine 20 mg/ml that expired on 4/10/25 were in the medication cart on 4/7/26. Both of these medications were prescribed for resident #1.

Plan of Correction

Directed [REDACTED] - 04/27/2026)

Within 2 days of receipt of the plan of correction: The administrator or designee shall return the expired medication to the pharmacy or destroy it in a safe manner according to the Department of Environmental Protection and Federal and State regulations.

Within 5 days of receipt of the plan of correction and at least monthly thereafter: The Administrator or designee shall audit all medication storage areas in the home to ensure only current prescription, OTC, sample and CAM for individuals living in the home is kept in the home.

Within 15 days of receipt of the plan of correction: all staff persons qualified to administer medication shall be educated on this regulation and the home's policy and procedure to dispose of and replace medications that are expired. Documentation of the education shall be kept.