

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

June 9, 2026

[REDACTED]
MOUNT CARMEL OPCO LLC
[REDACTED]

RE: MOUNT CARMEL SENIOR LIVING
COMMUNITY
2616 LOCUST GAP HIGHWAY
MOUNT CARMEL, PA, 17851
LICENSE/COC#: 23172

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/09/2026 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: MOUNT CARMEL SENIOR LIVING COMMUNITY **License #:** 23172 **License Expiration:** 09/20/2026
Address: 2616 LOCUST GAP HIGHWAY, MOUNT CARMEL, PA 17851
County: NORTHUMBERLAND **Region:** NORTHEAST

Administrator

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

Legal Entity

Name: MOUNT CARMEL OPCO LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

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

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 04/09/2026

Inspection Dates and Department Representative

04/09/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 26 **Residents Served:** 12

Secured Dementia Care Unit

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

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 13
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 3 **Have Physical Disability:** 0

Inspections / Reviews

04/09/2026 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 05/10/2026

05/18/2026 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 06/08/2026
Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 05/26/2026

Inspections / Reviews *(continued)*

06/08/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/08/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 06/10/2026

06/09/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/08/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

60a - Staff/Support Plan

1. Requirements

2600.

60.a. Staffing shall be provided to meet the needs of the residents as specified in the resident's assessment and support plan.

Description of Violation

The home has 13 residents, 3 who require the assistance of one staff person to transfer. The home schedules 1 person on the overnight shift. The designated evacuation time from a fire safety expert based on the physical construction of the home is 3 minutes. The most recent sleeping hours fire drill on [redacted] at 4:30 a.m. took 2 staff persons 2 minutes and 45 seconds to evacuate 15 residents. All waking hours fire drills are being conducted with 2 staff, and they are timed at no less than 2 minutes and 43 seconds. The home cannot meet the needs of the residents on the overnight shift with one staff member in the event of an emergency.

Plan of Correction

Accept [redacted] - 06/08/2026

60a - Staff/Support Plan

1. Requirements 2600.60.a. Staffing shall be provided to meet the needs of the residents as specified in the resident's assessment and support plan.

Description of Violation

The home has 13 residents, 3 who require the assistance of one staff person to transfer. The home schedules 1 person on the overnight shift. The designated evacuation time from a fire safety expert based on the physical construction of the home is 3 minutes. The most recent sleeping hours fire drill on 3/13/26 at 4:30 a.m. took 2 staff persons 2 minutes and 45 seconds to evacuate 15 residents. All waking hours fire drills are being conducted with 2 staff, and they are timed at no less than 2 minutes and 43 seconds. The home cannot meet the needs of the residents on the overnight shift with one staff member in the event of an emergency.

Immediate correction: VP of Operations Nadine Beer is responsible for fixing the issue. The corporation has to budget and approve extra labor costs.

The immediate action: sending citation and complaint to corporate VPO and RDO Liaison. Proposing new staffing hours. Corporate VPO approval new staffing hours of midnight to 8am, 6pm to 11pm on 06/02/2026. Fire Marshal ran nighttime drill with administrator and time to evacuate increased to 4 minutes 30 seconds on 5/27/2026.

Emergency plan rewritten to include permanent staff from skilled to respond during emergency event, approved by corporate VPO on 06/02/2026.

Ongoing monitoring beginning 06/08/2026 to include: Rebecca Wilson Administrator and Kellie McDonald HR will monitor staffing requirements per regulations and staffing qualifications; VPO will monitor labor costs and effectiveness of second person hours approved adding in more hours should there be a need as this process moves forward. This will continue weekly for 90 days to be completed 8/31/2026. Rebecca Wilson administrator will continue to monitor fire drills monthly for 3 months to ensure within allotted time frame by fire marshal and capability of staff in those moments. This will be completed by 8/31/26.

Licensee's Proposed Overall Completion Date: 08/31/2026

Implemented [redacted] - 06/09/2026

181f - Record of Medication

2. Requirements

2600.

181.f. The resident's record shall include a current list of prescription, CAM and OTC medications for each resident who is self-administering [redacted] medication.

181f Record of Medication (continued)

Description of Violation

Resident [REDACTED] has been assessed to self administer medications. [REDACTED] and [REDACTED] were noted in the residents room and are not on the current list of medications.

Plan of Correction

Accept [REDACTED] - 05/18/2026)

2600.181.f. The resident's record shall include a current list of prescription, CAM and OTC medications for each resident who is self administering [REDACTED] medication.

Description of Violation:

Resident [REDACTED] has been assessed to self administer medications. Cepacol lozenges and Refresh eye drops were noted in the residents room and are not on the current list of medications.

Plan of correction:

Medication immediately added into resident medication list notating may self administer. Staff will continue to audit medications monthly to ensure proper documentation for 3 months.

Licensee's Proposed Overall Completion Date: 08/07/2026

Implemented [REDACTED] - 06/09/2026)