

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

June 10, 2026

[REDACTED]
2725 4 MILE DRIVE OPERATING COMPANY LLC
[REDACTED]
[REDACTED]

RE: THE HILLSIDE SENIOR LIVING
COMMUNITY
2725 FOUR MILE DRIVE
MONTOURSVILLE, PA, 17754
LICENSE/COC#: 23095

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/14/2026 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 HILLSIDE SENIOR LIVING COMMUNITY License #: 23095 License Expiration: 11/21/2026
 Address: 2725 FOUR MILE DRIVE, MONTOURSVILLE, PA 17754
 County: LYCOMING Region: NORTHEAST

Administrator

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

Legal Entity

Name: 2725 4 MILE DRIVE OPERATING COMPANY LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 05/01/1998 Issued By: L & I
 Type: I-1 Date: 04/22/2020 Issued By: Loyalsock Twp.

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 53 Waking Staff: 40

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint, Incident Exit Conference Date: 04/14/2026

Inspection Dates and Department Representative

04/14/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 60 Residents Served: 33
 Secured Dementia Care Unit
 In Home: Yes Area: SCU Capacity: 27 Residents Served: 20
 Hospice
 Current Residents: 4
 Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 53
 Diagnosed with Mental Illness: 2 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 20 Have Physical Disability: 1

Inspections / Reviews

04/14/2026 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 05/14/2026
 06/01/2026 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 06/10/2026
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 06/10/2026

Inspections / Reviews *(continued)*

06/10/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/10/2026

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

On [REDACTED], Resident [REDACTED] had a fall and was sent to the hospital. The fall resulted in a closed head injury and contusion of the scalp. The home did not report this injury to the Bureau of Human Services Licensing.

Plan of Correction

Accept [REDACTED] - 06/01/2026)

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).

On 3/31/26, Resident [REDACTED] had a fall and was sent to the hospital. The fall resulted in a closed head injury and contusion of the scalp. The home did not report this injury to the Bureau of Human Services Licensing.

- 1. Resident [REDACTED] fall was reported to DHS on 4.14.2026 with verification from DSH on 4.15.26.
- 2. An audit will be conducted with a lookback of the past 30 days to ensure all falls with head injuries have been reported to DHS by June 5, 2026.
- 3. The PCHA has educated DOW/MCC on ensuring all head injuries are reported to DHS on April 16, 2026.
- 4. Random audits will be completed monthly x2 to ensure compliance. Audits will be reviewed at the quarterly Quality Assurance Meeting to ensure all residents are treated with dignity and respect.

Licensee's Proposed Overall Completion Date: 06/16/2026

Implemented [REDACTED] 06/10/2026)

141b1 - Annual Medical Evaluation

2. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident [REDACTED]’s medical evaluation dated [REDACTED] does not indicate that the residents’ needs can be met safely at the Personal Care Home.

Plan of Correction

Accept [REDACTED] 06/01/2026)

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Resident [REDACTED]’s medical evaluation dated 3/26/26, does not indicate that the residents’ needs can be met safely at the Personal Care Home.

- 1. Resident [REDACTED]’s medical evaluation has been corrected on May 29, 2026.

141b1 Annual Medical Evaluation (continued)

- 2. An audit will be conducted on all medical evaluations to ensure accuracy by June 10, 2026.
- 3. The PCHA has educated DOW/MCC on ensuring all medical evaluations are accurate on April 16, 2026.
- 4. Random audits will be completed monthly x2 to ensure compliance. Audits will be reviewed at the quarterly Quality Assurance Meeting to ensure all residents are treated with dignity and respect.

Licensee's Proposed Overall Completion Date: 06/16/2026

Implemented [REDACTED] - 06/10/2026)

225c - Additional Assessment

3. Requirements

2600.
 225.c. The resident shall have additional assessments as follows:

Description of Violation

Resident [REDACTED] Assessment dated [REDACTED], did not include that the resident is incontinent.

Plan of Correction

Accept [REDACTED] 06/01/2026)

2600.
 225.c.
 The resident shall have additional assessments as follows:

Resident [REDACTED] Assessment dated 8/18/25, did not include that the resident is incontinent.

- 1. Resident [REDACTED] assessment has been updated to reflect incontinence on April 17, 2026.
- 2. An audit will be completed to ensure all incontinence is accurate on assessments by June 10, 2026.
- 3. The PCHA has educated DOW/MCC on ensuring all assessments are accurate on April 16, 2026.
- 4. Random audits will be completed monthly x2 to ensure compliance. Audits will be reviewed at the quarterly Quality Assurance Meeting to ensure all residents are treated with dignity and respect.

Licensee's Proposed Overall Completion Date: 06/16/2026

Implemented [REDACTED] - 06/10/2026)