

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

May 14, 2026

[REDACTED], MANAGING MEMBER  
SERENITY CARE OLD FORGE LLC  
[REDACTED]

RE: SERENITY CARE OLD FORGE  
246 SOUTH MAIN STREET  
OLD FORGE, PA, 18518  
LICENSE/COC#: 23057

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/21/2026 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]

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: *SERENITY CARE OLD FORGE* License #: *23057* License Expiration: *03/28/2027*  
 Address: *246 SOUTH MAIN STREET, OLD FORGE, PA 18518*  
 County: *LACKAWANNA* Region: *NORTHEAST*

**Administrator**

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

**Legal Entity**

Name: *SERENITY CARE OLD FORGE LLC*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *06/24/2013* Issued By: *L&I*

**Staffing Hours**

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

**Inspection Information**

Type: *Full* Notice: *Unannounced* BHA Docket #:  
 Reason: *Renewal, Complaint* Exit Conference Date: *04/21/2026*

**Inspection Dates and Department Representative**

04/21/2026 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: *50* Residents Served: *35*  
 Secured Dementia Care Unit  
 In Home: *No* Area: Capacity: Residents Served:  
 Hospice  
 Current Residents: *0*  
 Number of Residents Who:  
 Receive Supplemental Security Income: *7* Are 60 Years of Age or Older: *35*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *0* Have Physical Disability: *0*

**Inspections / Reviews**

04/21/2026 Full  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/16/2026*

05/12/2026 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: *05/14/2026*  
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/19/2026*

Inspections / Reviews *(continued)*

05/14/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/14/2026

Reviewer: [REDACTED]

Follow Up Type: *Bypass Document Submission*

05/14/2026 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/14/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

65g - Annual Training Content

1. Requirements

2600.

65.g. Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:

- 2. Emergency preparedness procedures and recognition and response to crises and emergency situations.

Description of Violation

Staff Person A, date of hire [REDACTED] did not receive training in emergency preparedness during training year 2025.

Plan of Correction

Accept ([REDACTED] - 05/12/2026)

Staff person A was trained in emergency preparedness on 05/11/26 to make up for the missed training in December of 2025. Administrator will ensure training and sign in sheets are completed prior to staff leaving training.

Licensee's Proposed Overall Completion Date: 05/11/2026

Implemented ([REDACTED] - 05/14/2026)

66a - Staff Training Plan

2. Requirements

2600.

66.a. A staff training plan shall be developed annually.

Description of Violation

The home does not have a staff training plan for 2026, which indicates month of training, date of training, training hours, and name of trainer.

Plan of Correction

Accept ([REDACTED] - 05/14/2026)

The 2026 annual training plan was completed on 04/21/2026. Going forward the Administrator will ensure that the annual staff training plan is completed at the start of the new year with the month of training, date of training, training hours and name of the trainer.

Licensee's Proposed Overall Completion Date: 05/12/2026

Implemented ([REDACTED] - 05/14/2026)

85d - Trash Receptacles

3. Requirements

2600.

85.d. Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

Description of Violation

At 9:30a.m., the trash cans in the shared resident bathroom/shower room on the 2nd and 3rd floor were not covered.

Plan of Correction

Accept ([REDACTED] - 05/14/2026)

Housekeeping was reeducated on 04/21/2026 regarding the importance of ensuring that trash can lids are covered at all times in the bathroom/shower rooms on 2nd and 3rd floors. Lids were placed back on trash cans immediately. Going forward housekeeping will sign a monitoring sheet daily to ensure trash receptacles are covered.

Administer/designee will also monitor to ensure ongoing compliance.

Licensee's Proposed Overall Completion Date: 05/12/2026

Implemented ([REDACTED] - 05/14/2026)

## 162c - Menus Posted

**4. Requirements**

2600.

162.c. Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

**Description of Violation**

*On 4/21/26 at 9:25a.m., the home's menu was not posted for a full week in advance and was only posted until 4/26/26.*

**Plan of Correction****Accept (█ - 05/14/2026)**

*Dietary manager was reeducated on the regulations regarding posting the menu 1 week in advance on 04/22/26. Menu for the week of 04/27/26 through 05/03/2026 was posted on 04/22/2026. Going forward the dietary manager will ensure menus will be posted for a full week in advance. Menu posting will be monitored weekly using a signed monitoring sheet to ensure completion. Administrator/designee will also monitor to ensure ongoing compliance.*

**Licensee's Proposed Overall Completion Date: 05/12/2026**

**Implemented (█ - 05/14/2026)**