

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

June 9, 2026

[REDACTED]
PRESBYTERIAN HOME IN THE PRESBYTERY OF HUNTINGDON
[REDACTED]

RE: PRESBYTERIAN HOME
220 NEWRY STREET
HOLLIDAYSBURG, PA, 16648
LICENSE/COC#: 34340

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/08/2026 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: PRESBYTERIAN HOME License #: 34340 License Expiration: 03/17/2027
 Address: 220 NEWRY STREET, HOLLIDAYSBURG, PA 16648
 County: BLAIR Region: CENTRAL

Administrator

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

Legal Entity

Name: PRESBYTERIAN HOME IN THE PRESBYTERY OF HUNTINGDON
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 06/26/2000 Issued By: Labor and Industry

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 41 Waking Staff: 31

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint Exit Conference Date: 05/08/2026

Inspection Dates and Department Representative

05/08/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 50 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: 0 Are 60 Years of Age or Older: 35
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 8 Have Physical Disability: 1

Inspections / Reviews

05/08/2026 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 06/05/2026

05/28/2026 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 06/05/2026
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 06/03/2026

Inspections / Reviews *(continued)*

05/29/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/05/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 06/08/2026

06/09/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/05/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

63d - Certified CPR Staff

1. Requirements

2600.

63.d. A staff person who is trained in first aid or certified in obstructed airway techniques or CPR shall provide those services in accordance with his training, unless the resident has a do not resuscitate order.

Description of Violation

On [REDACTED], Resident [REDACTED] suffered a cardiac event. Staff Member A and Staff Member B, who were both certified in CPR/First Aid were present and on duty at the time and failed to render assistance to the resident in accordance with his/her training.

Plan of Correction**Accept [REDACTED] - 05/29/2026)**

1. An immediate Plan of Correction was conducted on 10/3/2025 due to citation. No other residents have been affected because of this deficient practice and there have been no other DHS reportable per citation 63.d since 10/3/2025.
2. An initial audit was conducted by the PC Administrator on 10/6/2025 ensuring current residents had a designated code status. A follow up audit was completed by the PC Administrator or designee to ensure current residents have a code status ordered by 6/5/26.
3. The Personal Care Administrator educated PC clinical staff beginning no later than 10/7/2025 on the Code Status Policy and identifying each resident's code status.
The PC Administrator or Designee will provide re-education to current PC clinical team members (licensed nurses, med techs, pc aides) by 6/5/26 on the following: Community Code Status Policy; identifying resident's code status; the requirement to immediately contact emergency services simultaneously with initiating/performing CPR if ordered; and supervisor/administrator is to be notified immediately after the necessary resident treatment concludes, not prior to emergency services.
4. The PC Administrator or Designee will conduct drill audits with PC clinical team members (licensed nurses, med techs, pc aides) that include verification of resident code status, if designated/ordered to be a full code CPR to begin immediately with simultaneous notification to emergency services, and that team members notify supervisor/administrator immediately after the necessary resident treatment concludes. Audits will be conducted weekly for 2 months beginning 6/5/26 to validate compliance/performance in an emergency where CPR is required. Audit results will be forwarded to the Quality Assurance committee for review and recommendations.

Licensee's Proposed Overall Completion Date: 06/05/2026

Implemented [REDACTED] - 06/09/2026)