

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

June 5, 2026

[REDACTED], ADMINISTRATOR
EAGLE VALLEY PERSONAL CARE HOME INC
500 FRONT STREET, PO BOX 8969
MILESBERG, PA, 16853

RE: EAGLE VALLEY PERSONAL CARE
HOME
500 FRONT STREET
MILESBERG, PA, 16853
LICENSE/COC#: 22743

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/19/2026 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: EAGLE VALLEY PERSONAL CARE HOME	License #: 22743	License Expiration: 05/25/2027
Address: 500 FRONT STREET, MILESBURG, PA 16853		
County: CENTRE	Region: NORTHEAST	

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

Legal Entity		
Name: EAGLE VALLEY PERSONAL CARE HOME INC		
Address: 500 FRONT STREET, PO BOX 8969, MILESBURG, PA, 16853		
Phone: [REDACTED]	Email: [REDACTED]	

Certificate(s) of Occupancy		
Type: I-2	Date: 01/08/2008	Issued By: L & I

Staffing Hours		
Resident Support Staff: 0	Total Daily Staff: 55	Waking Staff: 41

Inspection Information		
Type: Full	Notice: Unannounced	BHA Docket #:
Reason: Renewal, Incident		Exit Conference Date: 05/19/2026

Inspection Dates and Department Representative	
05/19/2026 - On-Site:	[REDACTED]

Resident Demographic Data as of Inspection Dates			
General Information			
License Capacity: 60		Residents Served: 52	
Secured Dementia Care Unit			
In Home: No	Area:	Capacity:	Residents Served:
Hospice			
Current Residents: 5			
Number of Residents Who:			
Receive Supplemental Security Income: 1		Are 60 Years of Age or Older: 52	
Diagnosed with Mental Illness: 0		Diagnosed with Intellectual Disability: 0	
Have Mobility Need: 3		Have Physical Disability: 0	

Inspections / Reviews		
05/19/2026 Full		
Lead Inspector: [REDACTED]	Follow-Up Type: POC Submission	Follow-Up Date: 06/12/2026
06/03/2026 - POC Submission		
Submitted By: [REDACTED]	Date Submitted: 06/04/2026	
Reviewer: [REDACTED]	Follow-Up Type: Document Submission	Follow-Up Date: 06/10/2026

Inspections / Reviews *(continued)*

06/05/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/04/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

17 - Record Confidentiality

1. Requirements

2600.

17. Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

Description of Violation

At approximately 9:50 a.m., the door to Staff Person A's office was open with resident demographic information being visible from the hallway area.

Plan of Correction

Accept (redacted) - 06/02/2026

Staff person A's door was immediately closed. Staff person A understands the importance of confidentiality. After initial inspection, a review of policy F 1 was completed, and updated.

- 1. The policy F 1 was printed and attached to a record of training form for all staff to review and sign.
- 2. This administrator or designee will conduct weekly spot checks throughout the facility to ensure confidential information is maintained in restricted area's only.

Licensee's Proposed Overall Completion Date: 06/02/2026

Implemented (redacted) - 06/04/2026

103e - Left Overs

3. Requirements

2600.

103.e. Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

Description of Violation

At approximately 10:10 a.m. in the north side kitchen area, there was an unlabeled and undated bag of what appeared to be shredded wheat cereal in the lower cabinet by the stove.

At approximately 2:05 p.m. in the walk-in freezer, there was a full bag and a half bag of frozen round breaded patties that were not labeled and not dated.

Plan of Correction

Accept (redacted) - 06/02/2026

- 1. The shredded wheat cereal was labeled immediately with the date that corresponded with the box that was in the south kitchen.
- 2. The full and half bag of frozen round breaded patties that were not labeled were immediately labeled and dated.
- 3. Policy J 1 Food safety and Sanitation was reviewed and updated.
- 4. The policy J 1 was printed and attached to a record of training form for all staff to review and sign.
- 5. This administrator or designee will monitor weekly all food storage areas to ensure items are labeled and dated correctly.

Licensee's Proposed Overall Completion Date: 06/02/2026

Implemented (redacted) - 06/04/2026

103g - Storing Food

4. Requirements

2600.

103.g. Food shall be stored in closed or sealed containers.

Description of Violation

At approximately 2:05 p.m. in the walk-in freezer, there was an opened bag of frozen round breaded patties that was unsealed.

Plan of Correction**Accept ([REDACTED] - 06/02/2026)**

The bag of frozen round breaded patties were sealed immediately, and labeled with the date and item.

- 1. Policy J 1 Food safety and Sanitation was reviewed and updated.*
- 2. The policy J 1 was printed and attached to a record of training form for all staff to review and sign.*
- 3. This administrator or designee will monitor weekly all food storage areas to ensure items are labeled and dated correctly.*

Licensee's Proposed Overall Completion Date: 06/02/2026

Implemented ([REDACTED] - 06/04/2026)
