

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

July 2, 2026

[REDACTED], OWNER  
KEPPLER PERSONAL CARE NORTHERN CAMBRIA, INC  
[REDACTED]

RE: REBEKAH MANOR WELLNESS  
COMMUNITY  
1912 PHILADELPHIA AVE  
NORTHERN CAMBRIA, PA, 15714  
LICENSE/COC#: 34022

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/27/2026 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:** REBEKAH MANOR WELLNESS COMMUNITY      **License #:** 34022      **License Expiration:** 03/17/2027

**Address:** 1912 PHILADELPHIA AVE, NORTHERN CAMBRIA, PA 15714

**County:** CAMBRIA      **Region:** CENTRAL

**Administrator**

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

**Legal Entity**

**Name:** KEPPLER PERSONAL CARE NORTHERN CAMBRIA, INC

**Address:** [REDACTED]

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

**Certificate(s) of Occupancy**

**Type:** C-2 LP      **Date:** 06/21/1990      **Issued By:** Department of Labor and Industry

**Staffing Hours**

**Resident Support Staff:** 0      **Total Daily Staff:** 28      **Waking Staff:** 21

**Inspection Information**

**Type:** Full      **Notice:** Unannounced      **BHA Docket #:**

**Reason:** Renewal, Complaint      **Exit Conference Date:** 05/27/2026

**Inspection Dates and Department Representative**

05/27/2026 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 37      **Residents Served:** 26

**Secured Dementia Care Unit**

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

**Hospice**

**Current Residents:** 2

**Number of Residents Who:**

**Receive Supplemental Security Income:** 15      **Are 60 Years of Age or Older:** 22

**Diagnosed with Mental Illness:** 11      **Diagnosed with Intellectual Disability:** 1

**Have Mobility Need:** 2      **Have Physical Disability:** 0

**Inspections / Reviews**

05/27/2026 Full

**Lead Inspector:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 06/15/2026

06/24/2026 - POC Submission

**Submitted By:** [REDACTED]      **Date Submitted:** 06/30/2026

**Reviewer:** [REDACTED]      **Follow-Up Type:** Document Submission      **Follow-Up Date:** 07/01/2026

Inspections / Reviews *(continued)*

07/02/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/30/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

25b - Contract Signatures

1. Requirements

2600.

25.b. The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

Description of Violation

The resident-home contract, dated [REDACTED], for resident #1, was not signed by the payer.

The resident-home contract, dated [REDACTED], for resident #2, was not signed by the resident.

Plan of Correction

Accept ( [REDACTED] ) - 06/24/2026

- 1. Administrator sent contract to Rep Payee for Resident #1 to be signed 6/8/2026.
- 2. Resident #2 was not able to sign contract at time of admission and [REDACTED] the Power of Attorney, signed the contract. Administrator put a note on the contract that resident was not able to physically sign.
- 3. Administrator will be sure to have all areas of contracts signed moving forward.

Licensee's Proposed Overall Completion Date: 06/14/2026

Implemented ( [REDACTED] ) - 07/02/2026

60a - Staff/Support Plan

2. 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

All residents in the home have PRN medication orders.

No staff have been working in the home who are trained and qualified to administer medications to residents during the 11:00PM-7:00AM shift from 8/21/25 to present.

Plan of Correction

Accept ( [REDACTED] ) - 06/24/2026

- 1. All staff that administer medications did successfully complete a Department-approved medication administration course that includes the passing of the Department's performance-based competency test within the past two years.
- 2. There are three medication trained staff that are on-call at all times to provide medications to the residents from 11 p.m. to 7 a.m. at this time. Plan is to get more staff medication trained.
- 3. Administrator received Medication-Train the Trainer Certificate as of 5/5/2026 and will be able to provide staff with Medication Training moving forward. One staff member already completed as of 5/30/2026. See attached.

Licensee's Proposed Overall Completion Date: 06/30/2026

Implemented ( [REDACTED] ) - 07/02/2026

64c - Annual Training

3. Requirements

2600.

64.c. An administrator shall have at least 24 hours of annual training relating to the job duties. The Department-approved administrator training course specified in subsection (a) fulfills the annual training requirement for the first year.

64c - Annual Training (continued)

Description of Violation

██████████ the home's administrator, completed only 9 hours of Department-approved training in the 2025 calendar training year.

Plan of Correction

Accept (██████████) - 06/24/2026)

Administrator is on track to complete required hours for training in 2026 and all education/hours will be kept in the Administrator binder moving forward for tracking purposes. See attached education completed for 2026.

Licensee's Proposed Overall Completion Date: 06/14/2026

Implemented (██████████) - 07/02/2026)

65d - Initial Direct Care Training

4. Requirements

2600.

65.d. Direct care staff persons hired after April 24, 2006, may not provide unsupervised ADL services until completion of the following:

1. Training that includes a demonstration of job duties, followed by supervised practice.

Description of Violation

Direct care staff Member B, hired on ██████████, began providing unsupervised ADL services immediately. However, the staff person did not complete training that included a demonstration of job duties, followed by supervised practice until ██████████.

Plan of Correction

Accept (██████████) - 06/24/2026)

Administrator will monitor all employee education hours moving forward. See attached education plan that will be in a binder for all employees.

Licensee's Proposed Overall Completion Date: 06/14/2026

Implemented (██████████) - 07/02/2026)

65e - 12 Hours Annual Training

5. Requirements

2600.

65.e. Direct care staff persons shall have at least 12 hours of annual training relating to their job duties.

Description of Violation

Direct care staff Member B received only 8 hours of annual training in calendar training year 2025.

Plan of Correction

Accept (██████████) - 06/24/2026)

Administrator will monitor all employee education hours moving forward. See attached education plan that will be in a binder for all employees.

Licensee's Proposed Overall Completion Date: 06/14/2026

Implemented (██████████) - 07/02/2026)

65f - Training Topics

6. Requirements

2600.

## 65f - Training Topics (*continued*)

65.f. Training topics for the annual training for direct care staff persons shall include the following:

1. Medication self-administration training.
3. Care for residents with dementia and cognitive impairments.
4. Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
6. Safe management techniques.
7. Care for residents with mental illness or an intellectual disability, or both, if the population is served in the home.

### Description of Violation

*Direct care staff Member C did not receive training in the following topics in calendar training year 2025:*

- *Medication Administration*
- *Care for residents w/dementia & cognitive impairments*
- *Safe management techniques*
- *Care for residents with MN or ID, if served in the home*

*Direct care staff Member D did not receive training in the following topics in calendar training year 2025:*

- *Medication self-administration*
- *Care for residents w/dementia & cognitive impairments*
- *Infection control/cleanliness/immobility concerns*
- *Safe management techniques*
- *Care for residents with MH or ID, if served in the home*

### Plan of Correction

Accept (█) - 06/24/2026

*Administrator will monitor all employee education hours moving forward. See attached education plan that will be in a binder for all employees.*

**Licensee's Proposed Overall Completion Date:** 06/14/2026

Implemented (█) - 07/02/2026

## 65g - Annual Training Content

### 7. 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:

1. Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert. Videos prepared by a fire safety expert are acceptable for the training if accompanied by an onsite staff person trained by a fire safety expert.
3. Resident rights.
5. Falls and accident prevention.

### Description of Violation

*Staff Member B did not receive training in the following topics in calendar training year 2025:*

- *Fire safety by a fire safety expert or by a staff person trained by a fire safety expert*
- *Resident rights*

65g - Annual Training Content (continued)

Staff Member C did not receive training in the following topics in calendar training year 2025:

- Falls and accident preventions

Staff Member D did not receive training in the following topics in calendar training year 2025:

- Resident rights
- Falls and accident preventions

Plan of Correction

Accept ( ) - 06/24/2026

Administrator will monitor all employee education hours moving forward. See attached education plan that will be in a binder for all employees.

Licensee's Proposed Overall Completion Date: 06/14/2026

Implemented ( ) - 07/02/2026

88a - Surfaces

8. Requirements

2600.

88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

On 5/27/26 at 2:42PM, the 1st floor bathroom by the dining area had a ceiling tile above the shower with water damage and what appeared to be black mold.

Plan of Correction

Accept ( ) - 06/24/2026

Pipe discovered to be leaking. Pipe repaired and ceiling tile replaced. See attached photo.

Licensee's Proposed Overall Completion Date: 06/14/2026

Implemented ( ) - 07/02/2026

101o - Walls, Floors, Ceilings

9. Requirements

2600.

101.o. The bedrooms must have walls, floors and ceilings, which are finished, clean and in good repair.

Description of Violation

The carpet in room 27 had a sticky area approximately 8-9 inches round in front of the nightstand.

Plan of Correction

Accept ( ) - 06/24/2026

Carpet in room scrubbed 6/1/2026. See photo attached. Cleaning schedules in place and will be monitored.

Licensee's Proposed Overall Completion Date: 06/14/2026

Implemented ( ) - 07/02/2026

103f - Refrigerator/Freezer Temps

10. Requirements

2600.

103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

103f - Refrigerator/Freezer Temps (*continued*)**Description of Violation**

On 5/27/26 at 2:20PM, there was no thermometer in the upright white freezer.

**Plan of Correction**

Accept ( ) - 06/24/2026

5/27/2026- thermometer noted to be in freezer ice box by Lead Aide. Moved to a more visual location in freezer.

Licensee's Proposed Overall Completion Date: 06/14/2026

Implemented ( ) - 07/02/2026

## 132e - Fire Drill Sleeping Hours

**11. Requirements**

2600.

132.e. A fire drill shall be held during sleeping hours once every 6 months.

**Description of Violation**

The last fire drill conducted during sleeping hours was 2/16/25 at 5:51AM.

**Plan of Correction**

Accept ( ) - 06/24/2026

Administrator will monitor and have a fire drill once every six months during sleeping hours moving forward. Fire drill planned for June during sleeping hours. Fire Drills during sleeping hours will be highlighted on the fire drill log.

Licensee's Proposed Overall Completion Date: 06/30/2026

Implemented ( ) - 07/02/2026

## 190a - Completion Medication Course

**12. Requirements**

2600.

190.a. A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

**Description of Violation**

Staff Member C does not have current medication administration training and administered medications on the following dates and times to residents:

- On 5/2/26, 5/3/26, 5/4/26, 5/5/26, 5/6/26, 5/7/26, 5/8/26, 5/11/26, 5/12/26, 5/13/26, 5/19/26, 5/21/26, 5/24/26, 5/25/26 at 8:00AM to Resident #1.
- On 5/6/26, 5/7/26, 5/11/26, 5/19/26, 5/21/26, 5/23/26, 5/25/26 at 8:00AM to Resident #2.
- On 5/6/26, 5/7/26, 5/11/26, 5/19/26, 5/21/26, 5/23/26, 5/25 at 12:00PM to Resident #2.
- On 5/6/26, 5/7/26, 5/11/26, 5/19/26, 5/21/26, 5/23/26, 5/25 at 2:00PM to Resident #2.
- On 5/2/26, 5/3/26, 5/4/26, 5/5/26, 5/6/26, 5/7/26, 5/8/26, 5/11/26, 5/12/26, 5/13/26, 5/19/26, 5/21/26, 5/24/26, 5/25/26, 5/26/26 at 8:00AM to Resident #3.
- On 5/6/26, 5/7/26, 5/11/26, 5/19/26, 5/21/26, 5/23/26, 5/25/26 at 8:00AM to Resident #4.
- On 5/2/26, 5/3/26, 5/4/26, 5/5/26, 5/6/26, 5/7/26, 5/8/26, 5/11/26, 5/12/26, 5/13/26, 5/19/26, 5/21/26, 5/24/26, 5/25/26, 5/26/26 at 8:00AM to Resident #5.
- On 5/2/26, 5/3/26, 5/4/26, 5/5/26, 5/6/26, 5/7/26, 5/8/26, 5/11/26, 5/12/26, 5/13/26, 5/19/26, 5/21/26, 5/24/26, 5/25/26, 5/26/26 at 12:00PM to Resident #5.
- On 5/2/26, 5/3/26, 5/4/26, 5/5/26, 5/6/26, 5/7/26, 5/8/26, 5/11/26, 5/12/26, 5/13/26, 5/19/26, 5/21/26,

**190a - Completion Medication Course (continued)**

5/24/26, 5/25/26, 5/26/26 at 2:00PM to Resident #5.

Staff Member E does not have current medication administration training and administered medications on the following dates and times to residents:

- On 5/1/26, 5/14/26, 5/15/26, 5/18/26, 5/20/26, 5/23/26 at 8:00AM to Resident #1.
- On 5/1/26, 5/14/26, 5/15/26, 5/18/26, 5/20/26, 5/23/26 at 2:00PM to Resident #1.
- On 5/1/26, 5/4/26, 5/5/26, 5/9/26, 5/10/26, 5/12/26, 5/13/26, 5/14/26, 5/15/26, 5/18/26, 5/20/26, 5/24/26, 5/26/26, 5/27/26 at 8:00AM to Resident # 2.
- On 5/1/26, 5/4/26, 5/5/26, 5/9/26, 5/10/26, 5/12/26, 5/13/26, 5/14/26, 5/18/26, 5/20/26, 5/24/26, 5/26/26, 5/27/26 at 12:00PM to Resident #2.
- On 5/1/26, 5/4/26, 5/5/26, 5/9/26, 5/10/26, 5/12/26, 5/13/26, 5/14/26, 5/15/26, 5/18/26, 5/20/26, 5/24/26, 5/26/26 at 2:00PM to Resident #2.
- On 5/1/26, 5/14/26, 5/18/26, 5/20/26, 5/23/26, 5/27/26 at 8:00AM to Resident #3.
- On 5/1/26, 5/4/26, 5/5/26, 5/9/26, 5/10/26, 5/12/26, 5/13/26, 5/14/26, 5/15/26, 5/18/26, 5/20/26, 5/24/26, 5/26/26, 5/27/26 at 8:00AM to Resident #4.
- On 5/1/26, 5/14/26, 5/18/26, 5/20/26, 5/23/26, 5/27/26 at 8:00AM to Resident #5.
- On 5/14/26, 5/15/26, 5/18/26, 5/20/26, 5/23/26, 5/27/26 at 12:00PM to Resident #5.
- On 5/1/26, 5/14/26, 5/15/26, 5/18/26, 5/20/26, 5/23/26 at 2:00PM to Resident #5.

Staff Member F does not have current medication administration training and administered medications on the following dates and times to residents:

- 5/1/26, 5/6/26, 5/8/26, 5/9/26, 5/10/26, 5/16/26, 5/17/26, 5/18/26, 5/19/26, 5/20/26, 5/21/26, 5/22/26, 5/26/26 at 8:00PM to Resident #1.
- On 5/1/26, 5/5/26, 5/6/26, 5/8/26, 5/9/26, 5/10/26, 5/11/26, 5/12/26, 5/13/26, 5/16/26, 5/17/26, 5/18/26, 5/19/26, 5/20/26, 5/21/26, 5/22/26, 5/24/26, 5/26/26 at 4:00PM to Resident #2
- On 5/1/26, 5/5/26, 5/6/26, 5/8/26, 5/9/26, 5/10/26, 5/11/26, 5/12/26, 5/13/26, 5/16/26, 5/17/26, 5/18/26, 5/19/26, 5/20/26, 5/21/26, 5/22/26, 5/24/26, 5/26/26 at 8:00PM to Resident #2.
- On 5/1/26, 5/5/26, 5/6/26, 5/8/26, 5/9/26, 5/10/26, 5/11/26, 5/12/26, 5/13/26, 5/16/26, 5/17/26, 5/18/26, 5/19/26, 5/20/26, 5/21/26, 5/22/26, 5/24/26, 5/26/26 at 8:00PM to Resident #3.
- On 5/1/26, 5/5/26, 5/6/26, 5/8/26, 5/9/26, 5/10/26, 5/11/26, 5/12/26, 5/13/26, 5/16/26, 5/17/26, 5/18/26, 5/19/26, 5/20/26, 5/21/26, 5/22/26, 5/24/26, 5/26/26 at 8:00PM to Resident #4.
- On 5/1/26, 5/6/26, 5/8/26, 5/9/26, 5/10/26, 5/16/26, 5/17/26, 5/18/26, 5/19/26, 5/20/26, 5/21/26, 5/22/26, 5/26/26 at 4:00PM to Resident #5.
- On 5/1/26, 5/6/26, 5/8/26, 5/9/26, 5/10/26, 5/16/26, 5/17/26, 5/18/26, 5/19/26, 5/20/26, 5/21/26, 5/22/26, 5/26/26 at 8:00PM to Resident #5.

**Plan of Correction**

Accept ( ) - 06/24/2026

1. All staff that administer medications did successfully complete a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within

190a Completion Medication Course (continued)

the past 2 years. However they were not up to date on the chart reviews and observations.

2. Administrator received Medication Train the Trainer Certification as of 5/5/2026 and will be able to complete all requirement moving forward.

3. Working with [REDACTED] who is a Certified Trainer to get all staff up to date with medication certification requirements.

Licensee's Proposed Overall Completion Date: 06/30/2026

Implemented [REDACTED] - 07/02/2026)