

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

June 22, 2026

[REDACTED]
PRESBYTERIAN SENIORCARE
[REDACTED]
[REDACTED]

RE: WOODSIDE PLACE OF
WASHINGTON OF PRESBYTERIAN
SENIORCARE
954 REDSTONE ROAD
WASHINGTON, PA, 15301
LICENSE/COC#: 45099

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/01/2026, 06/03/2026 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: WOODSIDE PLACE OF WASHINGTON OF PRESBYTERIAN SENIORCARE

License #: 45099

License Expiration: 02/24/2027

Address: 954 REDSTONE ROAD, WASHINGTON, PA 15301

County: WASHINGTON

Region: WESTERN

Administrator

Name: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Legal Entity

Name: PRESBYTERIAN SENIORCARE

Address: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-2

Date: 12/12/2019

Issued By: South Strabane Township

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 70

Waking Staff: 53

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Complaint

Exit Conference Date: 06/03/2026

Inspection Dates and Department Representative

06/01/2026 - On-Site: [REDACTED]

06/03/2026 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 36

Residents Served: 35

Special Care Unit

In Residence: Yes

Area: Entire residence

Capacity: 36

Residents Served: 35

Hospice

Current Residents: 6

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: 35

Have Physical Disability: 0

Inspections / Reviews

06/01/2026 Partial

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 06/24/2026

Inspections / Reviews (*continued*)

06/15/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/22/2026

Reviewer: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 06/22/2026

06/18/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/22/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 06/30/2026

06/22/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/22/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 06/30/2026

06/22/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/22/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

60a Staffing/support plan needs

1. Requirements

2800.

60.a. Staffing shall be provided to meet the needs of the residents as specified in the resident's assessment and support plan. Residence staff or service providers who provide services to the residents in the residence shall meet the applicable professional licensure requirements.

Description of Violation

The entire residence is licensed as a special care unit (SCU). According to the most recent documentation from a fire safety expert, dated [REDACTED], the maximum evacuation time to the residence's fire-safe areas is 3 minutes, 28 seconds. On [REDACTED] at 2:36pm, the residence conducted an unannounced fire drill with 9 staff persons; however, the evacuation time to the fire-safe areas was completed in 5 minutes, which exceeds the current maximum evacuation time. Also, the residence routinely schedules 3 staff persons in the home during the 10:00pm through 6:00am shift, which is not adequate to evacuate all residents during an emergency.

Plan of Correction**Directed ([REDACTED] 06/18/2026)**

The time and date on the letter was erroneously transcribed to read 03 minutes and 28 seconds. A new letter reflecting correct information was signed by the fire safety expert on 06/03/2026. The letter reflects the correct evacuation time of 6 minutes, 0 seconds and the correct date of the supervised fire drill and inspection 03/03/2026. The correct time of 6 minutes 0 seconds is consistent with the supervised drill/inspection letters from 03/03/2025, 03/05/2024, and 03/21/2023. The fire drill that occurred on 12/30.2025 at 0431 am, had 3 staff members participating and the maintenance person conducting the drill. The drill was completed with an evacuation time of 4 minutes 0 seconds, which is under the 6 minutes 0 seconds allotted in the observed drill referenced in the corrected letter. A drill was conducted on 06The staff person responsible for conducting fire drills has been re-educated on the residence's fire drill procedures by the administrator on 06/16/2026. (DIRECTED: Documentation of the staff education shall be kept in accordance with 2800.65L. [REDACTED] 6/18/26). A fire drill will be held during the month of June 2026 during sleeping hours with only 3 team members participating and documentation will be kept. Beginning 06/15/2026, administrator shall review all fire drill records monthly to ensure compliance. The corrected letter, letters from 2023, 2024, and 2025 reflecting the 6 minute 0 second timing will be submitted to substantiate that a transcription error occurred on the letter originally provided from 03/03/2026.

Proposed Overall Completion Date: 06/17/2026

Directed Completion Date: 06/30/2026

Implemented ([REDACTED] - 06/22/2026)

132c Fire drill records

2. Requirements

2800.

132.c. A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the residence at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

Description of Violation

The residence's fire drill records do not include the amount of time it took to evacuate the residents in minutes and seconds for all the monthly fire drills conducted from [REDACTED] through [REDACTED], to include the following:

132c Fire drill records (continued)

- [REDACTED] at 2:36pm-*evacuation time was 5 minutes*
- [REDACTED] at 8:44am-*evacuation time was 3 minutes*
- [REDACTED] at 12:19pm-*evacuation time was 3 minutes*
- [REDACTED] at 1:20pm-*evacuation time was 4 minutes*
- [REDACTED] at 9:27am-*evacuation time was 5 minutes*

Plan of Correction

Directed [REDACTED] - 06/18/2026)

The staff person responsible for conducting fire drills was re-educated by the administrator on 06/15/2026 on the residence's fire drill procedures, including documentation of fire drills, including the evacuation time in minutes and seconds. (DIRECTED: Documentation of the staff education shall be kept in accordance with 2800.65L. [REDACTED] 6/18/26). Beginning 06/15/2026, The administrator shall review all fire drill records monthly to ensure compliance.

Proposed Overall Completion Date: 06/15/2026

Directed Completion Date: 06/30/2026

Implemented [REDACTED] - 06/22/2026)

132d Evacuation

3. Requirements

2800.

132.d. Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert. For purposes of this subsection, the fire safety expert may not be a staff person of the residence.

Description of Violation

According to the most recent documentation from a fire safety expert, dated [REDACTED], the maximum evacuation time to the residence's fire-safe areas is 3 minutes, 28 seconds; however, the evacuation time for the fire drill conducted on [REDACTED] at 2:36pm was completed in 5 minutes, which exceeds the current maximum evacuation time.

Plan of Correction

Directed [REDACTED] - 06/18/2026)

The time and date on the letter was erroneously transcribed. A new letter reflecting correct information was signed by the fire safety expert on 06/03/2026. The letter reflects the correct evacuation time of 6 minutes, 0 seconds and the correct date of the supervised fire drill and inspection 03/03/2026. The correct time of 6 minutes 0 seconds is consistent with the supervised drill/inspection letters from 03/03/2025, 03/05/2024, and 03/21/2023. The staff person responsible for conducting fire drills has been re-educated on the residence's fire drill procedures by the administrator on 06/16/2026. (DIRECTED: Documentation of the staff education shall be kept in accordance with 2800.65L. [REDACTED] 6/18/26). Beginning 06/15/2026, administrator shall review all fire drill records monthly to ensure compliance.

Proposed Overall Completion Date: 06/15/2026

Directed Completion Date: 06/30/2026

Implemented [REDACTED] - 06/22/2026)

132g Fire drills – days/times

4. Requirements

2800.

132.g. Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

Description of Violation

The residence routinely schedules 3 direct care staff persons during the 10:00pm through 6:00pm shift; however, the residence has not conducted an unannounced fire drill with only 3 staff persons within the past year.

Repeated violation- [REDACTED]

Plan of Correction

Directed [REDACTED] 06/18/2026)

The time and date on the letter was erroneously transcribed. A new letter reflecting correct information was signed by the fire safety expert on 06/03/2026. The letter reflects the correct evacuation time of 6 minutes, 0 seconds and the correct date of the supervised fire drill and inspection 03/03/2026. The correct time of 6 minutes 0 seconds is consistent with the supervised drill/inspection letters from 03/03/2025, 03/05/2024, and 03/21/2023. The staff person responsible for conducting fire drills has been re-educated on the residence's fire drill procedures by the administrator on 06/16/2026. (DIRECTED: Documentation of the staff education shall be kept in accordance with 2800.65L. [REDACTED] 6/18/26). Beginning 06/15/2026, administrator shall review all fire drill records monthly to ensure compliance. A fire drill was conducted at

DIRECTED: By 6/30/26: The residence shall conduct an unannounced fire drill during the 10:00pm through 6:00am shift using only 3 staff persons. Documentation of the fire drill shall be kept in accordance with 2800.132c. [REDACTED] 6/18/26

Proposed Overall Completion Date: 06/17/2026

Directed Completion Date: 06/30/2026

Implemented [REDACTED] - 06/22/2026)

233c Key-locking devices

5. Requirements

2800.

233.c. If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

Description of Violation

At approximately 10:00am, the code that was posted to operate the keypad at the emergency exit door near bedroom [REDACTED] did not open and unlock the door.

Plan of Correction

Accept [REDACTED] - 06/18/2026)

The keypad was found to be defective and was immediately replaced by maintenance, all keypads in the

233c Key-locking devices (continued)

community were immediately tested by maintenance, and all other keypads were found to be functional. Maintenance and the administrator will ensure that all exit door keypads are operating properly and the code posted is correct weekly x3 then monthly thereafter. Records of audits will be kept in the administrator's office.

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

Implemented [REDACTED] - 06/22/2026)