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

August 21, 2026

[redacted]
QUALITY LIFE SERVICES-APOLLO LLC
[redacted]

RE: QUALITY LIFE SERVICES-APOLLO
153 GOODVIEW DRIVE
APOLLO, PA, 15613
LICENSE/COC#: 45531

[redacted]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/16/2026 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: *QUALITY LIFE SERVICES-APOLLO* **License #**: *45531* **License Expiration**: *05/08/2027*

Address: *153 GOODVIEW DRIVE, APOLLO, PA 15613*

County: *WESTMORELAND* **Region**: *WESTERN*

Administrator

Name: [redacted] **Phone**: [redacted] **Email**: [redacted]

Legal Entity

Name: *QUALITY LIFE SERVICES-APOLLO LLC*

Address: [redacted]

Phone: [redacted] **Email**: [redacted]

Certificate(s) of Occupancy

Type: *C-2 LP* **Date**: *08/13/2001* **Issued By**: *L&I*

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff**: *24* **Waking Staff**: *18*

Inspection Information

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

Reason: *Incident* **Exit Conference Date**: *07/16/2026*

Inspection Dates and Department Representative

07/16/2026 - On-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *80* **Residents Served**: *23*

Secured Dementia Care Unit

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

Hospice

Current Residents: *3*

Number of Residents Who:

Receive Supplemental Security Income: *0* **Are 60 Years of Age or Older**: *23*

Diagnosed with Mental Illness: *0* **Diagnosed with Intellectual Disability**: *0*

Have Mobility Need: *1* **Have Physical Disability**: *0*

Inspections / Reviews

07/16/2026 Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *07/27/2026*

08/13/2026 - POC Submission

Submitted By: [redacted] **Date Submitted**: *08/18/2026*

Reviewer: [redacted] **Follow-Up Type**: *Document Submission* **Follow-Up Date**: *08/28/2026*

Inspections / Reviews *(continued)*

08/21/2026 Document Submission

Submitted By: [redacted] **Date Submitted:** *08/18/2026*

Reviewer: [redacted] **Follow Up Type:** *Not Required*

15a - Resident Abuse Report

1. Requirements

2600.

15.a. The residence shall immediately report suspected abuse of a home served in the resident's in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

On [redacted] At 11:20 a.m., resident A indicated to staff member [redacted] that late at night on [redacted] staff member A verbally abused her however, the repored staff on resident abuse was not reported to the Area on Aging until [redacted] at approximately 4:00 p.m.

Plan of Correction ***Accept [redacted] - 08/13/2026)***

Any allegations of abuse will be investigated and reported immediately to the appropriate agencies. Administrator or designee will conduct random resident interviews weekly 7/27,8/3,8/10 and 8/17 for four weeks than one monthly for two months September and October to identify any concerns regarding staff interactions with residents. Training with each employee will be done by PC Administrator or designee by 7/27/26 reviewing mandatory reporting requirements. Education will be kept on file. A poster was placed in staff breakroom with mandatory reporting instructions and results of the audits will be recorded and reviewed in QAPI meeting.

Licensee's Proposed Overall Completion Date: *07/23/2026*

Implemented [redacted] - 08/21/2026)