

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

August 28, 2026

[REDACTED]
EC OPCO LOYALSOCK LLC

[REDACTED]
EC OPCO LOYALSOCK, LLC
[REDACTED]

RE: CELEBRATION VILLA OF LOYALSOCK
2985 FOUR MILE DRIVE
MONTOURSVILLE, PA, 17754
LICENSE/COC#: 22719

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/21/2026 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: CELEBRATION VILLA OF LOYALSOCK **License #:** 22719 **License Expiration:** 07/03/2026
Address: 2985 FOUR MILE DRIVE, MONTTOURSVILLE, PA 17754
County: LYCOMING **Region:** NORTHEAST

Administrator

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

Legal Entity

Name: EC OPCO LOYALSOCK LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 09/22/1999 **Issued By:** L & I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 57 **Waking Staff:** 43

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 07/21/2026

Inspection Dates and Department Representative

07/21/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 90 **Residents Served:** 45

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:** 45
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 12 **Have Physical Disability:** 0

Inspections / Reviews

07/21/2026 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 08/20/2026

08/21/2026 - POC Submission

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

Inspections / Reviews (*continued*)

08/28/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/28/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

85a - Sanitary Conditions

1. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

Resident [REDACTED] has a history of refusing proper cleaning care on their left ear. On [REDACTED] at 7:30am, Resident I was found with an open wound in the left ear, seeping with pus and a foul odor. Resident [REDACTED] was present in both the dining area and other common areas with the wound uncovered, resulting in an unsanitary environment for others.

Plan of Correction

Accept [REDACTED] - 08/21/2026)

ACTION:

On 7/3/26 upon finding the resident with a ear with a foul odor and pus, [REDACTED] was sent to the hospital at 7:15am and admitted to be treated with IV antibiotics and ear irrigation was completed. [REDACTED] was not present in any common areas on this day; [REDACTED] ate [REDACTED] dinner on the previous day in [REDACTED] room. The executive director spoke to the POA about the hospitalization and [REDACTED] shared [REDACTED] did not want any treatment for further interventions for the residents ear.

TRAINING:

On 8/20/26 the Executive Director will educate the Director of Nursing and Resident Care Coordinator on regulation 2600.85a to include recognizing and reporting signs and symptoms of wound infection. Staff will be educated that any resident with wounds with any odd smells or drainage should not be present in common areas with the wound exposed. If the resident refuses to have their wound covered, education and up to a 30 day notice will be given.

ONGOING:

Beginning on 8/17/26, any resident with an open wound will have the DON or Resident care coordinator check to make sure all current wounds are healing properly and not presenting any abnormalities. The Director of Nursing or Resident Care Coordinator will conduct weekly audits of all residents with open wounds x 4 weeks, then monthly x 3 months. Any wounds noted to be infected will be immediately reported to the resident's PCP. Audits will be reviewed monthly at the Quality Assurance meeting x 3 months. Documentation will be kept on file for review.

Licensee's Proposed Overall Completion Date: 11/25/2026

Implemented [REDACTED] 08/28/2026)

142b - Refusal-Medical Treatment

2. Requirements

2600.

142.b. If a resident refuses routine medical or dental examination or treatment, the refusal and the continued attempts to educate and inform the resident about the need for health care shall be documented in the resident's record.

Description of Violation

Resident [REDACTED] has refused daily cleaning of their left ear on multiple occasions. However, there is no documentation in the resident's record of the home's attempts to educate and inform the resident about the need for health care.

142b Refusal Medical Treatment (*continued*)

Plan of Correction

Accept [REDACTED] - 08/21/2026)

ACTION:

The resident was in the community for 16 days for the ear to be cleaned. [REDACTED] refused and it was documented in the MAR that the resident refused the ear cleaning 8 out of [REDACTED] 16 active days.

TRAINING:

On 8/19/26, The director of nursing will conduct training to all med techs on regulation 2600.42b to include the importance of education provided to the resident about the ill and unwanted effects from the refusal and documentation for refusing treatments. Staff will be educated on updating physician on refusals

ONGOING:

Beginning on 8/17/26 the Director of Nursing or Resident Care Coordinator will complete weekly audits of all care refusals x 4 weeks then monthly x 3 months to ensure refusals are properly documented, appropriately follow up is completed, and support plans are updated. Any findings will be addressed immediately. Audits will be reviewed monthly at the Quality Assurance meeting x 3 months. Documentation will be kept on file for review. Audits of all treatments will be completed to ensure that any refusals will have education to go along with them.

Licensee's Proposed Overall Completion Date: 11/25/2026

Implemented [REDACTED] - 08/28/2026)

227d - Support Plan Medical/Dental

3. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Resident [REDACTED] support plan, dated [REDACTED] does not document the resident's refusal of daily cleaning of the left ear.

Plan of Correction

Accept [REDACTED] - 08/21/2026)

ACTION:

The resident's plan of care was outside of the acuity guidelines, and comfort was [REDACTED] goal due to the ear condition not resolving itself after two hospitalizations and [REDACTED] enrollment to hospice services. [REDACTED] was transferred to the gate house on 7/13 to maintain and respect [REDACTED] wishes to be comfortable and declining further treatment.

TRAINING:

On 8/20/26, the Executive Director will educate the Director of Nursing and the Resident Care Coordinator on

227d Support Plan Medical/Dental (continued)

regulation 2600.227d, to include the requirement to communicate and document resident refusals and ensure that ongoing significant refusals are incorporated into the resident's support plan. training was completed by the executive director to the director of nursing and the resident care coordinator to share the important of timely rasp updates

ONGOING:

Beginning on 8/18/26, the Director of Nursing or Resident Care Coordinator will audit 5 resident support plans weekly x 4 weeks, then monthly x 3 months to verify that identified resident refusals are appropriately reflected in the support plan. Any deficiencies identified will be addressed immediately. All findings will be reviewed monthly at the Quality Assurance meeting x 3 months. Documentation will be kept on file for review. any refusals of MAR treatments that are refused will be logged to check the compliance of keeping rasps up to date, The director of nursing will audit 3 refusals a week for three weeks and then 6 refusals monthly to ensure proper RASP compliance

Licensee's Proposed Overall Completion Date: 11/25/2026

Implemented [REDACTED] - 08/28/2026)