

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

September 24, 2026

[REDACTED]
INSINGERS PERSONAL CARE HOMES WEST INC
[REDACTED]
[REDACTED]

RE: INSINGERS PERSONAL CARE
HOMES WEST
124 EMERY STREET
WILLIAMSPORT, PA, 17701
LICENSE/COC#: 22745

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/22/2026 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: *INSINGERS PERSONAL CARE HOMES WEST*License #: *22745*License Expiration: *03/01/2027*Address: *124 EMERY STREET, WILLIAMSPORT, PA 17701*County: *LYCOMING*Region: *NORTHEAST*

Administrator

Name: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED] /

Legal Entity

Name: *INSINGERS PERSONAL CARE HOMES WEST INC*

Address: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Certificate(s) of Occupancy

Type: *1 2*Date: *01/17/2019*Issued By: *DLI*

Staffing Hours

Resident Support Staff: *0*Total Daily Staff: *27*Waking Staff: *20*

Inspection Information

Type: *Partial*Notice: *Unannounced*

BHA Docket #:

Reason: *Incident*Exit Conference Date: *07/22/2026*

Inspection Dates and Department Representative

07/22/2026 On Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *29*Residents Served: *27*

Secured Dementia Care Unit

In Home: *No*

Area:

Capacity:

Residents Served:

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *25*Are 60 Years of Age or Older: *13*Diagnosed with Mental Illness: *21*Diagnosed with Intellectual Disability: *2*Have Mobility Need: *0*Have Physical Disability: *0*

Inspections / Reviews

07/22/2026 - Partial

Lead Inspector: [REDACTED]

Follow Up Type: *POC Submission*Follow Up Date: *08/22/2026*

Inspections / Reviews (*continued*)

09/02/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/09/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 09/04/2026

09/24/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/09/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

102i - Soap Dispenser**1. Requirements**

2600.

102.i. A dispenser with soap shall be provided within reach of each bathroom sink. Bar soap is not permitted unless there is a separate bar clearly labeled for each resident who shares a bathroom.

Description of Violation

At approximately 10:50 a.m. the 2nd floor public restroom located by the dining room area did not have hand soap.

Repeat violation: [REDACTED]

Plan of Correction**Accept** [REDACTED] - 09/02/2026)

The administrator is responsible for ensuring that there are working soap dispensers in every bathroom. The administrator checked all bathrooms on 7-22-26 to ensure that there were working soap dispensers in all bathrooms. The soap dispenser that was broke was replaced while the state inspector was still here. The administrator will check bathrooms and dispensers monthly to ensure that we remain in compliance. Having a working soap dispenser will ensure that personal hygiene is maintained.

Licensee's Proposed Overall Completion Date: 08/19/2026

Implemented [REDACTED] - 09/24/2026)**141a - Medical Evaluation****2. Requirements**

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission.

Description of Violation

Resident [REDACTED] was admitted to the facility on [REDACTED]. The resident did not have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department.

Plan of Correction**Accept** [REDACTED] 09/02/2026)

The administrator is responsible for ensuring that all residents have current DME's and that they are updated annually. The administrator reviewed the resident DME's on 7-22-26, 7-23-26 and 7-24-26 to ensure that all DME's were current or that a doctor's appointment was set up for a new DME. The administrator will review DME's the second Monday of each month to ensure compliance. Accurate resident DME's helps the home decide if it can meet a resident need, helps develop an accurate support plan and ensures that the residents medical needs will be met.

Licensee's Proposed Overall Completion Date: 08/19/2026

Implemented [REDACTED] 09/24/2026)**225c - Additional Assessment****3. Requirements**

2600.

225.c. The resident shall have additional assessments as follows:

2. If the condition of the resident significantly changes prior to the annual assessment.

225c Additional Assessment (continued)

Description of Violation

Resident [REDACTED] most recent assessment was completed on [REDACTED]. On [REDACTED], the resident left the facility during extreme heat temperatures to attempt to navigate the public transportation system to go shopping. The resident was unable to safely navigate the bus system back to the facility as the resident had to be located by River Valley transit and transported back to the facility. The resident's assessment was not updated to reflect additional services that the facility was going to put into place to ensure resident's safety.

Repeated Violation [REDACTED]**Plan of Correction****Accept** [REDACTED] 09/02/2026)

The administrator is responsible for ensuring that all RASPS are current and up to date. The administrator corrected resident [REDACTED] RASP on 7 22 2026. The administrator was not aware of any cognitive deficiencies because the RASP and the DME from the previous home did not list any. The administrator followed all precautions as advised by the state inspector from 7 22 26. (Resident once again is missing) The administrator reviewed all RASPS to ensure that they were accurate. The administrator will review all RASPS the second Monday of every month to ensure accuracy. The administrator also reenforced with the residents the importance of notifying staff when they are leaving. An updated RASP will help to ensure the safety of the resident and will list their abilities in order to help keep them safe.

Licensee's Proposed Overall Completion Date: 08/19/2026**Implemented** [REDACTED] - 09/24/2026)