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

August 21, 2026

[redacted]
ISLE SAYRE LLC
[redacted]

RE: SAYRE PERSONAL CARE CENTER
201 KEEFER LANE
SAYRE, PA, 18840
LICENSE/COC#: 23413

[redacted],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/04/2026, 08/12/2026 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: *SAYRE PERSONAL CARE CENTER* **License #**: *23413* **License Expiration**: *06/01/2027*

Address: *201 KEEFER LANE, SAYRE, PA 18840*

County: *BRADFORD* **Region**: *NORTHEAST*

Administrator

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

Legal Entity

Name: *ISLE SAYRE LLC*

Address: [redacted]

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

Certificate(s) of Occupancy

Type: *I-1* **Date**: *12/16/2021* **Issued By**: *Code Inspections Inc.*

Staffing Hours

Resident Support Staff: **Total Daily Staff**: *47* **Waking Staff**: *35*

Inspection Information

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

Reason: *Incident* **Exit Conference Date**: *08/12/2026*

Inspection Dates and Department Representative

08/04/2026 - On-Site: [redacted]

08/12/2026 - Off-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *90* **Residents Served**: *47*

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: *0* **Have Physical Disability**: *0*

Inspections / Reviews

08/04/2026 Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *08/27/2026*

Inspections / Reviews *(continued)*

08/19/2026 POC Submission

Submitted By: [redacted] **Date Submitted:** *08/20/2026*

Reviewer: [redacted] **Follow Up Type:** *Document Submission* **Follow Up Date:** *08/26/2026*

08/21/2026 Document Submission

Submitted By: [redacted] **Date Submitted:** *08/20/2026*

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

162c - Menus Posted

1. Requirements

2600.
162.c. Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

Description of Violation

The home's menu for the current week of [redacted] to [redacted] was not posted.

Plan of Correction ***Accept [redacted] - 08/19/2026)***

Menus for the current week of 8/2/26 through 8/8/26 and 8/9/26 through 8/15/26 were immediately posted on 8/4/26 by Dietary Supervisor. On 8/5/26 the Dietary supervisor was educated by the administrator on the requirement that weekly menus be prepared and posted in a conspicuous and public place at least one week in advanced.

The Dietary supervisor will ensure that the current and upcoming week's menus are posted at all times. The Administrator will complete an audit weekly for four weeks that appropriate menus are posted and prepared at least one week in advanced. Following the four weeks audit the administrator will then monitor monthly for 2 months to ensure continued compliance.

Licensee's Proposed Overall Completion Date: *08/18/2026*

Implemented [redacted] - 08/20/2026)

221c - Post Activity Calendar

2. Requirements

2600.
221.c. A current weekly activity calendar shall be posted in a conspicuous and public place in the home.

Description of Violation

The home does not have a current weekly activity calendar posted in a public and conspicuous place in the home. The activity calendar that is posted is for July 2026.

Plan of Correction ***Accept [redacted] - 08/19/2026)***

On 8/4/26, the Administrator immediately posted the current activity calendar in a conspicuous and public place in the home. on 8/7/26 the Administrator educated the Activity Director regarding the requirement of 2600.221(c) that a current weekly activity calendar be posted in a conspicuous and public place.

Effective 8/4/26, the Activity Director will be responsible for ensuring that the activity calendar for the current week is posted and remains current. The Activity Director will review the posted calendar at the beginning of each week and replace or update it as necessary.

The Administrator will complete a weekly Activity Calendar Audit starting on 8/7/26 verifying that the calendar posted is current for that week and upcoming week and is displayed in a conspicuous and public place. The audit will be completed weekly for 6 weeks and monthly thereafter to ensure continued compliance.

Licensee's Proposed Overall Completion Date: *08/18/2026*

Implemented [redacted] - 08/20/2026)

225c - Additional Assessment

3. Requirements

2600.
225.c. The resident shall have additional assessments as follows:

Description of Violation

Resident [redacted] assessment, dated [redacted], does not include that the resident is a registered sex offender and receiving psychiatry services.

Plan of Correction ***Accept [redacted] - 08/19/2026)***

On 8/4/26, Resident [redacted]'s assessment was reviewed and updated to include that the resident is a registered sex offender, and psychiatry services have been offered to the resident. All direct care staff were educated on the changes and support plan. On 8/5/26 the Administrator reviewed the requirements of 2600.225(c) with the Director or Wellness and re-educated.

On 8/10/26 to determine whether other residents could be affected, the Administrator and Director of Wellness began to review all current resident assessments to verify that information contained in each resident's record that requires additional assessment is accurately reflected on the resident's assessment.

To prevent recurrence, all new and updated resident assessments will be dual reviewed by the Administrator and Director of Wellness for completeness and accuracy. The review will include comparison of the assessment with resident records to ensure applicable diagnoses, behavioral health or psychiatric services, and other circumstances requiring additional assessment are appropriately identified and addressed. The Administrator and DOW will document completion of the review on an Assessment Compliance Audit. Audits will be completed for all new or updated assessments going forward.

Licensee's Proposed Overall Completion Date: *08/21/2026*

Implemented [redacted] - 08/21/2026)

227c - Support Plan Revision

4. Requirements

2600.
227.c. The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment.

Description of Violation

Resident [redacted]s assessment was completed on [redacted]. The resident's support plan was not updated after their unsuccessful [redacted] attempt of [redacted] an unknown amount of [redacted] resulting in hospitalization on [redacted] to include [redacted], inability to safely avoid poisons, supervision of 2-hour checks.

Plan of Correction ***Accept [redacted] - 08/19/2026)***

On 8/4/26 the residents' support plan was updated. On 7/13/26 2-hour checks were initiated indefinitely and remain in place. Starting 8/17/26 the Administrator and Director of Wellness will conduct a weekly audit of resident hospitalizations, emergency room visits, incident reports, documented changes in condition, behavioral or mental health changes, and other identified changes in resident needs from the previous week for 4 weeks. Residents identified through the audit will be reviewed to determine whether the change in needs requires revision of the resident's support plan.

Licensee's Proposed Overall Completion Date: *08/18/2026*

227c Support Plan Revision *(continued)*

Implemented [redacted] - 08/21/2026)