

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

April 2, 2025

[REDACTED]  
DUNCANSVILLE OPS LLC  
[REDACTED]

RE: THE WINDS AT MATTERN  
ORCHARD AL  
590 NEWRY LANE  
DUNCANSVILLE, PA, 16635  
LICENSE/COC#: 33835

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/13/2025 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: *THE WINDS AT MATTERN ORCHARD AL* License #: 33835 License Expiration: 10/31/2025  
 Address: 590 NEWRY LANE, DUNCANSVILLE, PA 16635  
 County: BLAIR Region: CENTRAL

**Administrator**

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

**Legal Entity**

Name: DUNCANSVILLE OPS LLC  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: C-2 LP Date: 08/01/2001 Issued By: Department of Labor & Industry

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 76 Waking Staff: 57

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #:  
 Reason: Complaint Exit Conference Date: 02/13/2025

**Inspection Dates and Department Representative**

02/13/2025 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 70 Residents Served: 52

Special Care Unit  
 In Home: No Area: Capacity: Residents Served:

Hospice  
 Current Residents: 12

Number of Residents Who:  
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 51  
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 24 Have Physical Disability: 1

**Inspections / Reviews**

02/13/2025 Partial  
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 03/03/2025

03/14/2025 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: 03/22/2025  
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 03/24/2025

Inspections / Reviews *(continued)*

04/02/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/22/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

63a First Aid/CPR 1:35

1. Requirements

2800.

63.a. For every 35 residents, there shall be at least one staff person trained in first aid and certified in obstructed airway techniques and CPR present in the residence at all times to meet the needs of the residents.

Description of Violation

On [REDACTED], from 11:00 PM to 7:00 AM, 52 residents were present in the residence. During this time only 1 staff member was present in the residence who was trained in first aid and certified in obstructed airway techniques and CPR.

Plan of Correction

Accept [REDACTED] - 03/14/2025)

*This plan of correction is submitted as required under State law. The submission of this Plan of Correction does not constitute any admission of civil or criminal liability on the part of the named Community as to contents stated in this Statement of Deficiencies. Any changes to the Community's policies and procedures made because of its receipt of this Statement of Deficiencies are subsequent remedial measures as that concept is employed in Rule 407 of the Federal Rules of Evidence and any corresponding state rules of civil procedure and should be inadmissible in any proceeding on that basis.? The Community submits this plan of correction with the intention that it be inadmissible by any third party in any civil or criminal action against the Community or any employee, agent, officer, director, attorney, or shareholder of the Community or affiliated companies.*

*55 Pa. Code § 2800 . 63.a. For every 35 residents, there shall be at least one staff person trained in first aid and certified in obstructed airway techniques and CPR present in the residence at all times to meet the needs of the residents.?*

*As of 2/14/2025, the Community Director has engaged a training provider to conduct CPR certification and recertification courses. The first set of courses was completed by 2/27/2025. Documentation of training will be maintained. The Care Team Manager or designee will schedule the courses quarterly and as needed to maintain compliance with regulation.*

*The Executive Director and Care Team Manager completed an audit of team member personnel files for active CPR/1st Aid certification. The audit was completed as of 3/1/2025.*

*Starting week of 3/2/2025, the Executive Director or designee will maintain an updated list of CPR/1st Aid certification team members and expiration dates to prevent lapses in CPR / 1st Aid certification. The Executive Director will review list monthly to verify compliance. Monthly audits will start March of 2025.*

*Starting week of 3/2/2025, the Executive Director or designee will confirm that a minimum of the two of the team members scheduled for the shift have current CPR/1st aid certification.*

*The Executive Director, or designee will review the plan of correction at the Quality Management Plan meeting to verify ongoing compliance. The Quality Management Plan meeting will be held by March 20, 2025.*

**Licensee's Proposed Overall Completion Date: 03/23/2025**

**Implemented [REDACTED] - 04/02/2025)**

65a Fire Safety-1st day

2. Requirements

2800.

65.a. Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following:

1. Evacuation procedures.
2. Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable.

65a Fire Safety 1st day (*continued*)

3. The designated meeting place outside the building or within the fire-safe area in the event of an actual fire.
4. Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable.
5. The location and use of fire extinguishers.
6. Smoke detectors and fire alarms.
7. Telephone use and notification of emergency services.

**Description of Violation**

Staff person A, whose first day of work was [REDACTED] did not receive orientation on the following topics:

1. Evacuation procedures.
2. Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable.
3. The designated meeting place outside the building or within the fire safe area in the event of an actual fire.
4. Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable.
5. The location and use of fire extinguishers.
6. Smoke detectors and fire alarms.
7. Telephone use and notification of emergency services.

**Plan of Correction**

Accept ( [REDACTED] ) - 03/14/2025)

*This plan of correction is submitted as required under State law. The submission of this Plan of Correction does not constitute any admission of civil or criminal liability on the part of the named Community as to contents stated in this Statement of Deficiencies. Any changes to the Community's policies and procedures made because of its receipt of this Statement of Deficiencies are subsequent remedial measures as that concept is employed in Rule 407 of the Federal Rules of Evidence and any corresponding state rules of civil procedure and should be inadmissible in any proceeding on that basis.? The Community submits this plan of correction with the intention that it be inadmissible by any third party in any civil or criminal action against the Community or any employee, agent, officer, director, attorney, or shareholder of the Community or affiliated companies.*

*55 Pa. Code § 2800. 65.a. Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following: 1. Evacuation procedures. 2. Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable. 3. The designated meeting place outside the building or within the fire safe area in the event of an actual fire. 4. Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable. 5. The location and use of fire extinguishers. 6. Smoke detectors and fire alarms. 7. Telephone use and notification of emergency services.*

*Team member A is no longer working at the community. No action needed.*

*Starting the week of 3/2/2025, the Environmental Services Manager or designee is responsible to conduct new hire team members on regulations 65(a)(1-7) on or prior to 1st day of work. Documentation of training will be maintained.*

*Starting the week of 3/2/2025, the Executive Director or designee will complete a monthly audit of new hires to verify compliance with PA ALR 2800.65(a)(1-7).*

*The Executive Director or designee will complete an audit of team member personnel files to identify team members needing training on regulation 65(a)(1-7). The audit will be completed by 3/7/2025.*

*The Environmental Service Manager or designee will complete training with team members identified as needing the training on regulation 65(a)(1-7) by 3/14/2025. Documentation of training will be maintained.*

*The Executive Director or designee will retrain the leadership team on regulation 65(a)(1-7). Education will be provided by 3/14/2025. Documentation of training will be maintained.*

**65a Fire Safety 1st day (continued)**

*The Executive Director, or designee will review the plan of correction at the Quality Management Plan meeting to verify ongoing compliance. The Quality Management Plan meeting will be held by March 20, 2025.*

**Licensee's Proposed Overall Completion Date: 03/23/2025**

**Implemented [REDACTED] - 04/02/2025)**