

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

June 4, 2025

[REDACTED]
SHENANGO PRESBYTERIAN SENIORCARE
[REDACTED]

RE: SHENANGO PRESBYTERIAN HOME
238 SOUTH MARKET STREET
NEW WILMINGTON, PA, 16142
LICENSE/COC#: 44034

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/12/2025 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: SHENANGO PRESBYTERIAN HOME License #: 44034 License Expiration: 11/03/2025
 Address: 238 SOUTH MARKET STREET, NEW WILMINGTON, PA 16142
 County: LAWRENCE Region: WESTERN

Administrator

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

Legal Entity

Name: SHENANGO PRESBYTERIAN SENIORCARE
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-1 Date: 11/10/1981 Issued By: Dept. of Labor & Industry

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 59 Waking Staff: 44

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Incident Exit Conference Date: 05/12/2025

Inspection Dates and Department Representative

05/12/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 46 Residents Served: 39

Secured Dementia Care Unit
 In Home: Yes Area: SDCU Capacity: 14 Residents Served: 13

Hospice
 Current Residents: 2

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 39
 Diagnosed with Mental Illness: 2 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 20 Have Physical Disability: 0

Inspections / Reviews

05/12/2025 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 06/02/2025

05/29/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 06/02/2025
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 06/17/2025

Inspections / Reviews *(continued)*

06/04/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/02/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

15a - Resident Abuse Report

1. Requirements

2600.

15.a. The home shall immediately report suspected abuse of a resident served in the home 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 approximately 7:00p.m. staff person A was assisting resident [REDACTED] with drying off after [REDACTED] shower. Resident [REDACTED] became aggressive and swung [REDACTED] arm towards staff person A, knocking [REDACTED] glasses onto the floor and bending the frames. Staff person A yelled [REDACTED] at resident [REDACTED]. This incident was overheard by staff person B who heard staff person A yell [REDACTED] at resident [REDACTED] twice around 7:00p.m. This incident was reported to staff person C on [REDACTED] at approximately 10:00p.m. who also reported this to staff person D. However, this allegation of abuse was not reported until [REDACTED] at 6:24a.m.

Plan of Correction

Accept [REDACTED] 05/29/2025)

In response to the violation received on [REDACTED] by the Pennsylvania Bureau of Human Services Licensing, immediate action was taken on 5/19/2025 by the home's administrator to begin to re-educate the involved team members on the components of 2600.15a as well as the proper protocol and policies of reporting alleged abuse. In addition, the interdisciplinary team as a whole will be re-educated on the components along with the home's policies/procedures regarding abuse reporting on 5/27/2025.

To enhance current compliant operations, the home's administrator will conduct random audits with five team members monthly times three, presenting questions regarding components of regulation 2600.15a and proper abuse and neglect reporting.

Results/findings of the audits will be brought back to the home's QM meetings for discussion, review and suggestions. The home's next QM meeting is scheduled for 6/17/2025

Licensee's Proposed Overall Completion Date: 08/31/2025

Implemented [REDACTED] 06/04/2025)

42b - Abuse

2. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [REDACTED], at approximately 7:00p.m. staff person A was assisting resident [REDACTED] with drying off after [REDACTED] shower. Resident [REDACTED] became aggressive and swung [REDACTED] arm towards staff person A, knocking [REDACTED] glasses onto the floor and bending the frames. Staff person A yelled [REDACTED] at resident [REDACTED]. This incident was overheard by staff person B who heard staff person A yell [REDACTED] at resident [REDACTED] twice around 7:00p.m.

42b Abuse (continued)

Plan of Correction

Accept [redacted] - 05/29/2025)

In response to the violation received on [redacted] by the Pennsylvania Bureau of Human Services Licensing, immediate action was taken on 4/28/2025 to remove staff member [redacted] from the community and was placed on administrative leave pending internal investigation. The home's administrator began to re educate the involved team members on the components of 2600.42b, types of abuse and reporting suspected abuse. In addition, the interdisciplinary team as a whole will be re educated on the components of 2600.42b along with the home's policies/procedures regarding abuse on 5/27/2025 Also in addition, the home's administrator has scheduled re educated for the entire interdisciplinary team on coping and managing behaviors of residents with dementia for 6/4/2025.

To maintain ongoing compliance, the home's administrator will conduct tabletop drills with scenarios involving types of abuse, proper coping with dementia behaviors and reporting process of alleged abuse at monthly team meetings starting 6/17/2025 with completion on 8/31/2025.

Results/findings of the audits will be brought back to the home's QM meetings for discussion, review and suggestions. The home's next QM meeting is scheduled for 6/17/2025

Licensee's Proposed Overall Completion Date: 08/31/2025

Implemented [redacted] - 06/04/2025)

187d - Follow Prescriber's Orders

3. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident [redacted] is prescribed [redacted], twice daily for Unspecified [redacted] and [redacted] due to known physiological condition. However, this medication was not administered to the resident on 4/27/25 both a.m. and p.m. doses, [redacted] both a.m. and p.m. doses and [redacted] a.m. dose because the medication was not available in the home.

Plan of Correction

Accept [redacted] - 05/29/2025)

In response to the violation received on [redacted] by the Pennsylvania Bureau of Human Services Licensing, immediate action was taken on 5/27/2025 by the home's administrator to begin to re educate the nursing and med techs on Regulation 2600.187d as well as the proper policy/procedure for medication re order with the pharmacy.

To maintain ongoing compliance, the PCHA or designee will conduct daily audits on medication re orders and the receipt of the medication from pharmacy x two weeks starting 5/26/2025, then monthly times three months with completion on 8/31/2025

Results/findings of the audits will be brought back to the home's QM meetings for discussion, review and suggestions. The home's next QM meeting is scheduled for 6/17/2025

187d Follow Prescriber's Orders (*continued*)

Licensee's Proposed Overall Completion Date: 08/31/2025

Implemented [REDACTED] - 06/04/2025)