



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

MAR 1 1 2019

Ms. Becky Hissong  
Executive Director  
Heritage Hills Retirement Community, Inc.  
4138 Fletcher Drive  
Greencastle, Pennsylvania 17225

RE: Heritage Hills Retirement Community  
2256 Shanks Church Road  
Greencastle, Pennsylvania 17225  
License #: 301690

Dear Ms. Hissong:

As a result of the Department's Bureau of Human Services Licensing's annual licensing inspection on February 5, 2019 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Inspection](https://www.surveymonkey.com/r/BHSL_Inspection).

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Rowe".

Jacqueline L. Rowe  
Director

Enclosure  
Violation Report



Violation Report: 30169 - 02/05/2019 - Showers, Michael  
 PCH Name: HERITAGE HILLS RETIREMENT COMMUNITY

**1. REGULATION 55 Pa.Code §2600**  
 2600.122 - Unless otherwise regulated by the Department of Labor and Industry, the Department of Health or the appropriate local building authority, all buildings must have at least two independent and accessible exits from every floor, arranged to reduce the possibility that both will be blocked in an emergency situation.

**2a. DESCRIPTION OF VIOLATION**  
 The second floor fire escape is not affixed or attached to the building, and will move back and forth upon stepping onto the platform..

**3. PLAN OF CORRECTION (POC)** (Attach pages as necessary. Remember that you must sign and date any attached pages.)  
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

- i. The administrator contacted a contractor to come out and look at the fire escape to see what it will take to attach the fire escape to the building.
- ii. The plan is to place a 2x6 board between the building and fire escape. The bolt the fire escape to the building
- iii. The contractor has scheduled to complete this th by March 4th, 2019.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Becky Hissong*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Becky Hissong</i>	Date <i>2/14/19</i>
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of <u>2/14/19</u> (Date)  The above plan of correction was approved by <u>BAS</u> (Initials)	Plan of correction implementation status as of <u>2/14/19</u> (Date)  <input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented
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Violation Report: 30169 - 02/05/2019 - Showers, Michael  
 PCH Name: HERITAGE HILLS RETIREMENT COMMUNITY

**1. REGULATION 55 Pa.Code §2600**

2600.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

**2a. DESCRIPTION OF VIOLATION**

Resident 1 was admitted to the home on 5/1/2018. The pre-admission screening form for Resident 1 was completed on 3/26/2018; more than 30 days prior to admission.

**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)**

*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

1. Administrator will complete all pre admission assessments within 30 days prior to admission
2. At time of admission, the administrator will review the pre admission assessment to ensure it has been completed in the 30 day prior.
3. if it isn't, the Administrator will complete a new one.
4. The charge nurse will review all new admission paperwork to make sure all date are correct.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) 

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) Becky Hinson Date 2/14/19

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 (Date)

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 (Initials)

Plan of correction implementation status as of 2/14/19  
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented