

Department of Human Services
Bureau of Human Service Licensing

November 24, 2020

SANDRA RICE, ADMINISTRATOR
CAMBRIDGE VILLAGE ASSOCIATES
1600 DARLINGTON ROAD
BEAVER FALLS, PA 15010

RE: CAMBRIDGE VILLAGE PERSONAL
CARE HOME
1600 DARLINGTON ROAD
BEAVER FALLS, PA, 15010
LICENSE/COC#: 40162

Dear Ms. Rice,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 11/09/0020 of the above facility, no regulatory citations have been identified as a result of this inspection.

Sincerely,
Jon Kimberland

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *CAMBRIDGE VILLAGE PERSONAL CARE HOME* License #: *40162* License Expiration Date: *01/03/2022*
Address: *1600 DARLINGTON ROAD, BEAVER FALLS, PA 15010*
County: *BEAVER* Region: *WESTERN*

Administrator

Name: *Sandra Rich* Phone: *7248461400* Email: *info@cambridge-village.com*

Legal Entity

Name: *CAMBRIDGE VILLAGE ASSOCIATES*
Address: *1600 DARLINGTON ROAD, BEAVER FALLS, PA, 15010*
Phone: *724-846-1400* Email: *INFO@CAMBRIDGE-VILLAGE.COM*

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *04/09/1998* Issued By: *Labor and Industry*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *69* Waking Staff: *52*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint* Exit Conference Date: *11/09/2020*

Inspection Dates and Department Representative

11/09/0020 - On-Site: Trish Bartlett

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *100* Residents Served: *51*

Secured Dementia Care Unit

In Home: *Yes* Area: *floor* Capacity: *24* Residents Served: *14*

Hospice

Current Residents: *4*

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: *18* Have Physical Disability: *0*

Inspections / Reviews

11/09/0020 - Partial

Lead Inspector: *Trish Bartlett* Follow-Up Type: Follow-Up Date:

No Deficiencies Identified