

Department of Human Services
Bureau of Human Service Licensing

February 24, 2022

[REDACTED]
THE RIDGE AT HERITAGE MEADOWS LLC
[REDACTED]
[REDACTED]

RE: THE RIDGE AT HERITAGE MEADOWS
1126 ROSS AVENUE
FORD CITY, PA, 16226
LICENSE/COC#: 45289

Dear Ms. Erin Graham,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/06/2022, 01/12/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Jason Williams

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *THE RIDGE AT HERITAGE MEADOWS* License #: *45289* License Expiration: *12/14/2022*
Address: *1126 ROSS AVENUE, FORD CITY, PA 16226*
County: *ARMSTRONG* Region: *WESTERN*

Administrator

Name: [REDACTED] Phone: *724-504-3083* Email: [REDACTED]

Legal Entity

Name: *THE RIDGE AT HERITAGE MEADOWS LLC*
Address: *115 HERITAGE MEADOWS LANE, WORTHINGTON, PA, 16262*
Phone: *7247637170* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *04/07/2000* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *23* Waking Staff: *17*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint* Exit Conference Date: *01/06/2022*

Inspection Dates and Department Representative

01/06/2022 - On-Site: [REDACTED]

01/12/2022 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *45* Residents Served: *19*

Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *2*

Number of Residents Who:

Receive Supplemental Security Income: *3* Are 60 Years of Age or Older: *19*
Diagnosed with Mental Illness: *3* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *4* Have Physical Disability: *0*

Inspections / Reviews

01/06/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *02/14/2022*

Inspections / Reviews *(continued)*

02/15/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *02/18/2022*

02/24/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

16c - Written Incident Report

1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On 11/19/2021, at approximately 4:00 p.m., Manor Township Police arrested staff persons A and B at the home for outstanding warrants. The home did not report this incident to the Department.

Plan of Correction

Accept

Attached is a completed Reportable Incident as requested by supervisor Jason Williams.

Also attached is the outline and the staff signature page for the Annual Quality Management meeting, please see the first bullet point, in which reportable incidents were discussed

Attachment: Reportable Incident

Attachment: Annual Quality Management Meeting Outline

Attachment: Staff Sign-In for AQMM

Document Submission

Implemented

plan submitted.

190a - Completion Medication Course

1. Requirements

2600.

190.a. A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

Description of Violation

Staff person A, who has not successfully completed the Department-approved medications administration annual practicum course, administered medications to residents to include the following:

On 11/4/21, at 8:00 p.m., staff person A administered the medication, Buspirone HCL to resident #1.

Plan of Correction

Directed

The staff member that administered the medication on 11/4/2021 is no longer employed with the agency.

The staff member in question, was to have annual practicum course completed in December 2021, as posted on the 2021 Staff Learning Plan.

The facility involved in the POC did not receive initial licensure until 11/12/2021; prior to 11/12/2021, the facility was operated under the former personal care home of [REDACTED], no longer in business.

An audit tool was created to review and document initial training and annual practicum training for all Medication Technicians; all med tech charts will be reviewed by 02/21/2022

Attachment: DHS License Certificate The Ridge at Heritage Meadows

Attachment: 2021 staff training calendar for The Ridge at Heritage Meadows, LLC as was licensed as of 11/12/2021

Attachment: Med Tech Audit Tool

190a - Completion Medication Course (continued)

VIOLATION WITHDRAWN JW 2/15/22

Document Submission

Implemented

plan submitted.