

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

November 28, 2023

[REDACTED], ADMINISTRATOR  
HERITAGE SPRINGS MEMORY CARE INC  
327 FARLEY CIRCLE  
LEWISBURG, PA, 17837

RE: HERITAGE SPRINGS MEMORY CARE  
327 FARLEY CIRCLE  
LEWISBURG, PA, 17837  
LICENSE/COC#: 22598

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/23/2023 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]  
Acting Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

**Name:** HERITAGE SPRINGS MEMORY CARE      **License #:** 22598      **License Expiration:** 02/04/2024

**Address:** 327 FARLEY CIRCLE, LEWISBURG, PA 17837

**County:** UNION      **Region:** NORTHEAST

**Administrator**

**Name:** Emily Anthony      **Phone:** [REDACTED]      **Email:** [REDACTED]

**Legal Entity**

**Name:** HERITAGE SPRINGS MEMORY CARE INC

**Address:** 327 FARLEY CIRCLE, LEWISBURG, PA, 17837

**Phone:** [REDACTED]      **Email:** [REDACTED]

**Certificate(s) of Occupancy**

**Type:** I-2      **Date:** 01/03/2017      **Issued By:** Central Keystone

**Staffing Hours**

**Resident Support Staff:** 0      **Total Daily Staff:** 52      **Waking Staff:** 39

**Inspection Information**

**Type:** Partial      **Notice:** Unannounced      **BHA Docket #:**

**Reason:** Incident      **Exit Conference Date:** 11/23/2023

**Inspection Dates and Department Representative**

10/23/2023 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 64      **Residents Served:** 26

**Secured Dementia Care Unit**

**In Home:** Yes      **Area:** entire home      **Capacity:** 64      **Residents Served:** 26

**Hospice**

**Current Residents:** 0

**Number of Residents Who:**

**Receive Supplemental Security Income:** 0      **Are 60 Years of Age or Older:** 26

**Diagnosed with Mental Illness:** 0      **Diagnosed with Intellectual Disability:** 0

**Have Mobility Need:** 26      **Have Physical Disability:** 0

**Inspections / Reviews**

**10/23/2023 Partial**

**Lead Inspector:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 11/16/2023

**11/28/2023 - POC Submission**

**Submitted By:** [REDACTED]      **Date Submitted:** 11/28/2023

**Reviewer:** [REDACTED]      **Follow-Up Type:** Bypass Document Submission

Inspections / Reviews *(continued)*

11/28/2023 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/28/2023

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

**42c - Treatment of Residents****1. Requirements**

2600.

42.c. A resident shall be treated with dignity and respect.

**Description of Violation**

On [REDACTED] Staff Member B witnessed Staff Member yelling loudly in the face of resident #1. Resident 1 was visibly upset.

**Plan of Correction**

Accepted [REDACTED] - 11/28/2023)

Staff member B who did the reporting of staff member A was a facility staff member. When the incident occurred executive director did immediate reporting and called the agency to notify them of the incident. Staff member A was an agency worker who is no longer allowed to work at Heritage Springs. On 11/6/2023 all staff members were re-trained on resident rights. All staff re-signed the rights and were verbally educated. All staff will be trained annually on these rights.

Licensee's Proposed Overall Completion Date: 11/16/2023

Implemented [REDACTED] - 11/28/2023)