

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

April 3, 2024

[REDACTED]  
HERITAGE SPRINGS MONTOURSVILLE I INC  
[REDACTED]

RE: HERITAGE SPRINGS  
MONTOURSVILLE I  
878 OLD CEMENT ROAD  
MUNCY, PA, 17756  
LICENSE/COC#: 22825

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/25/2024 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: *HERITAGE SPRINGS MONTOURSVILLE I* License #: *22825* License Expiration: *12/11/2024*  
 Address: *878 OLD CEMENT ROAD, MUNCY, PA 17756*  
 County: *LYCOMING* Region: *NORTHEAST*

**Administrator**

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

**Legal Entity**

Name: *HERITAGE SPRINGS MONTOURSVILLE I INC*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *I-2* Date: *08/08/2021* Issued By: *L&I*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *114* Waking Staff: *86*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Incident* Exit Conference Date: *01/25/2024*

**Inspection Dates and Department Representative**

*01/25/2024 - On-Site:* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *60* Residents Served: *57*

**Secured Dementia Care Unit**  
 In Home: *Yes* Area: *NA* Capacity: *60* Residents Served: *57*

**Hospice**  
 Current Residents: *3*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *57*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *57* Have Physical Disability: *1*

**Inspections / Reviews**

**01/25/2024 - Partial**  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *02/19/2024*

**03/29/2024 - POC Submission**  
 Submitted By: [REDACTED] Date Submitted: *04/01/2024*  
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *04/01/2024*

Inspections / Reviews *(continued)*

04/03/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/01/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 42s - Privacy

**1. Requirements**

2600.

42.s. A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.

**Description of Violation**

On [REDACTED] staff member A took a video/picture of [REDACTED]. The background of the picture contained a bulletin board displaying pictures of [REDACTED] residents. The picture was posted to Snapchat social media.

**Plan of Correction****Accept [REDACTED] - 03/29/2024)**

Heritage Springs self-reported this incident where a staff member took "a selfie". Heritage Springs has a zero-tolerance policy for violation of 2600 regulations. On [REDACTED] the facility took immediate action conducting an internal investigation. On [REDACTED] the employee was terminated for using [REDACTED] phone on the community. In the January staff meeting all employees signed the zero cellphone policy (this is also done in first-day paperwork) An audit will be conducted monthly beginning in February to ensure all staff sign the no phone policy.

**Licensee's Proposed Overall Completion Date: 03/28/2024****Implemented [REDACTED] - 04/03/2024)**