

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

June 11, 2024

[REDACTED], ADMINISTRATOR  
HERITAGE SPRINGS MONTOURSVILLE I INC  
878 OLD CEMENT ROAD  
MUNCY, PA, 17756

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

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/23/2024, 04/24/2024 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]  
Human Services Licensing Supervisor

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:** 878 OLD CEMENT ROAD, MUNCY, PA, 17756  
**Phone:** [REDACTED]

**Certificate(s) of Occupancy**

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

**Staffing Hours**

**Resident Support Staff:**      **Total Daily Staff:** 116      **Waking Staff:** 87

**Inspection Information**

**Type:** Partial      **Notice:** Unannounced      **BHA Docket #:**  
**Reason:** Complaint, Incident      **Exit Conference Date:** 04/24/2024

**Inspection Dates and Department Representative**

04/23/2024 - On-Site: [REDACTED]  
04/24/2024 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 60      **Residents Served:** 58

**Secured Dementia Care Unit**

**In Home:** Yes      **Area:** Left & Right Wings      **Capacity:** 60      **Residents Served:** 58

**Hospice**

**Current Residents:** 3

**Number of Residents Who:**

**Receive Supplemental Security Income:** 0      **Are 60 Years of Age or Older:** 58  
**Diagnosed with Mental Illness:** 0      **Diagnosed with Intellectual Disability:** 0  
**Have Mobility Need:** 58      **Have Physical Disability:** 1

**Inspections / Reviews**

04/23/2024 Partial

**Lead Inspector:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 05/17/2024

05/20/2024 - POC Submission

**Submitted By:** [REDACTED]      **Date Submitted:** 06/11/2024  
**Reviewer:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 05/27/2024

Inspections / Reviews *(continued)*

06/07/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/11/2024

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 06/11/2024

06/11/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/11/2024

Reviewer: [REDACTED]

Follow Up Type: Not Required

## 42b - Abuse

**1. Requirements**

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

**Description of Violation**

Resident #1 and Resident #2 both reside in a secure dementia care unit and have diagnoses of [REDACTED]. On the morning of [REDACTED] Staff Member A witnessed Resident #1 and Resident #2 sitting on a couch together. Resident #2's sweater was unbuttoned, and Resident #1 was touching Resident #2's breast. Resident #2 made an attempt to push Resident #1's hand away but was unsuccessful.

Shortly before the incident, Staff Member A witnessed the residents engaged in hand holding and Resident #1 rubbing the leg of Resident #2. Staff Member A instructed Resident #1 and Resident #2 to cease physical contact. The residents complied with Staff Member A's requests, but Staff Member A did not separate the residents. Staff Member A had left the residents seated on the couch and returned to their job duties.

**Plan of Correction**

Accept [REDACTED] - 06/07/2024)

Heritage Springs self-reported this incident. All staff were retrained at staff meeting on 42B. Staff member that did not separate residents was verbally retrained by Resident Care Director. Administrative Assistant will do monthly audits to ensure that Resident Rights are in staff file. Executive Director will sign off on audit. Audit completed in May for all staff files. Resident #1 has not had any issues since and is being encouraged to sit in the recliners. When the resident is not in line of vision, he will have a silent pressure alarm that will alert staff at a central box that he is mobile.

Proposed Overall Completion Date: 05/31/2024

Licensee's Proposed Overall Completion Date: 05/31/2024

Implemented [REDACTED] - 06/11/2024)

## 227d - Support Plan Medical/Dental

**2. Requirements**

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

**Description of Violation**

Resident #3's assessment and support plan, dated [REDACTED], does not include documentation that after the fall that occurred on [REDACTED] the resident required 2-person assist for transfers, full physical assistance with ADLs, and that the resident ambulated with the use of a wheelchair.

**Plan of Correction**

Accept [REDACTED] 05/20/2024)

Resident Care Director updated RASP once reviewing on [REDACTED]. Executive Director reviewed 227d with Resident Care Director on this community. Resident Care Director will do monthly audits to ensure that RASP are up to date. Executive Director will sign off on audit. Audit completed in May for all resident RASP on community.

Licensee's Proposed Overall Completion Date: 05/20/2024

227d Support Plan Medical/Dental (*continued*)

Implemented ( [REDACTED] 06/11/2024)