

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

January 7, 2025

[REDACTED]
HERITAGE SPRINGS MONTOURSVILLE I INC
[REDACTED]
[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 10/31/2024 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]@m

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: DLI

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 57 Waking Staff: 43

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
 Reason: Renewal, Incident Exit Conference Date: 10/31/2024

Inspection Dates and Department Representative

10/31/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 60 Residents Served: 56
 Secured Dementia Care Unit
 In Home: Yes Area: Building Capacity: 60 Residents Served: 56
 Hospice
 Current Residents: 7
 Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 56
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 1 Have Physical Disability: 1

Inspections / Reviews

10/31/2024 Full
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 12/02/2024

12/12/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 01/06/2025
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 12/19/2024

Inspections / Reviews *(continued)*

01/02/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/06/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 01/06/2025

01/07/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/06/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

125a - Combustible Storage

1. Requirements

2600.

125.a. Combustible and flammable materials may not be located near heat sources or hot water heaters.

Description of Violation

The laundry room in Serenity Steet wing had an undergarment on the floor behind the dryer, posing a fire hazard.

Plan of Correction

Accept [redacted] - 01/02/2025)

The Executive Director re- moved the undergarment immediately on [redacted]. On [redacted] All staff were verbally re-educated on 125a. To ensure on going compliance on [redacted] the Med Tech will sign a daily Calendar to ensure no items are behind the dryer. The Resident Care Director will weekly audit the Calander and sign off on the week to ensure compliance.

Licensee's Proposed Overall Completion Date: 12/20/2024

Implemented [redacted] - 01/07/2025)

132h - Designated Meeting Place

2. Requirements

2600.

132.h. Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

Description of Violation

A fire drill was conducted on [redacted] [redacted] residents were stricken with COVID and quarantined to their room and did not evacuate for the fire drill.

Plan of Correction

Accept [redacted] - 01/02/2025)

The facility had [redacted] staff members stand in the resident's place during the fire drill to protect the other residents from being exposed to covid. On 10/31/24 All staff were verbally educated on 132h. Beginning November fire- drill (random monthly) All staff will ensure every resident is evacuated during a fire drill even if they have covid, the facility using social distancing by marking a active resident list. To ensure compliance the Executive Director and Maintenance will audit and sign each fire drill ensuring all residents were evacuated

Licensee's Proposed Overall Completion Date: 12/20/2024

Implemented [redacted] - 01/07/2025)