





**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

Emailing Date: April 9, 2025

[REDACTED]  
CNE Family Properties LLC  
[REDACTED]

RE: Pleasant Ridge  
981 Pleasant Hill Road  
Leechburg, Pennsylvania 15656  
License #: 456300

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspection on March 19, 2025, of the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because this is a new legal entity operating the home.

In accordance with 55 Pa.Code § 2600.11(b) (relating to procedural requirements for licensure or approval of personal care homes) a re-inspection of your newly licensed facility will be conducted within 3 months of the effective date of this license. Complete compliance with all applicable regulations is required in order to maintain your license.

During the inspection, citations on the enclosed Licensing Inspection Summary were found. All citations specified on the Licensing Inspection Summary must be corrected by the dates specified on the Licensing Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Your NEW license is enclosed.

Sincerely,

Juliet Marsala  
Deputy Secretary  
Office of Long-term Living

Enclosures  
License  
Licensing Inspection Summary

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

**Facility Information**

Name: *PLEASANT RIDGE* License #: *45630* License Expiration:  
Address: *981 PLEASANT HILL ROAD, LEECHBURG, PA 15656*  
County: *WESTMORELAND* Region: *WESTERN*

**Administrator**

Name: [REDACTED]

**Legal Entity**

Name: *CNE FAMILY PROPERTIES, LLC*  
Address: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *07/07/1998* Issued By: *L&I*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *58* Waking Staff: *44*

**Inspection Information**

Type: *Partial* Notice: *Announced* BHA Docket #:  
Reason: *Change Legal Entity* Exit Conference Date: *03/19/2025*

**Inspection Dates and Department Representative**

03/19/2025 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *73* Residents Served: *47*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *7*

**Number of Residents Who:**

Receive Supplemental Security Income: *21* Are 60 Years of Age or Older: *46*  
Diagnosed with Mental Illness: *21* Diagnosed with Intellectual Disability: *1*  
Have Mobility Need: *11* Have Physical Disability: *1*

**Inspections / Reviews**

**03/19/2025 - Partial**

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/03/2025*

03/27/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/01/2025

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 04/03/2025

04/01/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/01/2025

Reviewer: [REDACTED]

Follow-Up Type: Bypass Document Submission

04/01/2025 - Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/01/2025

Reviewer: [REDACTED]

Follow-Up Type: Exception

18 - Compliance With Laws

1. Requirements

2600.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

The Care Facility Carbon Monoxide Alarms Standards Act, enacted 6/23/2016, requires carbon monoxide alarms to be "installed in close proximity of, but not less than 15 feet from, any fossil fuel device or appliance." There were no operable carbon monoxide alarms near the following appliances: The gas stove in the kitchen, the gas dryers in the laundry room and the gas boilers in the boiler room.

Plan of Correction

Accept (████) - 04/01/2025)

All carbon monoxide alarms were corrected by placing a battery in each and were tested while the inspectors were in the building. This was done by Maintenance Director

Starting immediately 3/26/2025 all carbon monoxide alarms will be tested daily for one month, then monthly for 6months, by Maintenance Director. All batteries will be changed as needed and every time change in spring and fall, this will be done by the Maintenance Director Check form will be attached.

Licensee's Proposed Overall Completion Date: 04/01/2025

Implemented (████) - 04/01/2025)

89b - Hot Water Temperature

2. Requirements

2600.

89.b. Hot water temperature in areas accessible to the resident may not exceed 120°F.

Description of Violation

At 10:29 a.m., the hot water temperature at the common bathroom sink across from room 228 measured 130.1 degrees Fahrenheit.

Plan of Correction

Accept (████) - 04/01/2025)

Hot water tank was increased in temperature while the inspectors were still here. Random bathroom water temps will be taken daily for one month, then weekly to ensure that the water temp is correct. check sheet will be attached. Maintenance Director or designee will be responsible for water checks

Licensee's Proposed Overall Completion Date: 04/01/2025

Implemented (████) - 04/01/2025)

92 - Windows

3. Requirements

2600.

92. Windows and Screens - Windows, including windows in doors, must be in good repair and securely screened when doors or windows are open.

Description of Violation

There was no screen in the open window in the kitchen.

Plan of Correction

Accept (████) - 04/01/2025)

Maintance is having a screen made for the kitchen window and will be placed when complete. At this time the window will not be open until the screen is in place. A check daily for the screen in the kitchen will be done until

92 - Windows (continued)

*the screen is in place. Then the kitchen will be checked with all the other windows monthly. Copy of check sheet will be attached and will be completed by Maintenance Director or designee*

**Licensee's Proposed Overall Completion Date: 04/01/2025**

**Implemented [REDACTED] 01/2025)**

101j7 - Lighting/Operable Lamp

**4. Requirements**

2600.

101.j. Each resident shall have the following in the bedroom:

7. An operable lamp or other source of lighting that can be turned on at bedside.

**Description of Violation**

*Resident #1 did not have access to a source of light that can be turned on/off at bedside.*

**Plan of Correction**

**Accept [REDACTED] - 04/01/2025)**

*The lamp needed a extension cord to reach the plug in. This was corrected while the inspectors were in the building. There will be a daily check for lamps within reach of the bed and in working order for two weeks then monthly. Copy of check sheet will be attached. This is to be completed by housekeeping*

**Licensee's Proposed Overall Completion Date: 04/01/2025**

**Implemented [REDACTED] - 04/01/2025)**

124 - Notice to Fire Department

**5. Requirements**

2600.

124. The home shall notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.

**Description of Violation**

*The home did not have documentation of written notification to the local fire department of the address of the home, location of the bedrooms, and the assistance needed to evacuate in an emergency.*

**Plan of Correction**

**Accept [REDACTED] - 03/27/2025)**

*Fire department was notified while the inspectors were here by the administrator. Effected immediately the administrator or desognee will notify the fire department by fax or mail of every new admission or any change in needing assistance. Copy of notice will be kept in a binder in the administrators office.*

**Licensee's Proposed Overall Completion Date: 03/26/2025**

**Implemented [REDACTED] /01/2025)**