

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

May 22, 2025

[REDACTED]  
HERITAGE SPRINGS MEMORY CARE INC  
[REDACTED]

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

[REDACTED],  
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/07/2025 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 MEMORY CARE License #: 22598 License Expiration: 04/15/2026  
 Address: 327 FARLEY CIRCLE, LEWISBURG, PA 17837  
 County: UNION Region: NORTHEAST

**Administrator**

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

**Legal Entity**

Name: HERITAGE SPRINGS MEMORY CARE INC  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: I-2 Date: 01/03/2017 Issued By: L & I

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 24 Waking Staff: 18

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #:  
 Reason: Incident Exit Conference Date: 05/07/2025

**Inspection Dates and Department Representative**

05/07/2025 - On-Site [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 64 Residents Served: 24  
 Secured Dementia Care Unit  
 In Home: Yes Area: unit Capacity: 32 Residents Served: 19  
 Hospice  
 Current Residents: 2  
 Number of Residents Who:  
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 24  
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 0 Have Physical Disability: 1

**Inspections / Reviews**

05/07/2025 Partial  
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 05/29/2025

05/22/2025 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: 05/22/2025  
 Reviewer: [REDACTED] Follow-Up Type: Bypass Document Submission

Inspections / Reviews *(continued)*

05/22/2025 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/22/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

231b - Medical Evaluation

1. Requirements

2600.

231.b. A resident shall have a medical evaluation by a physician, physician’s assistant or certified registered nurse practitioner, documented on a form provided by the Department, within 60 days prior to admission. Documentation shall include the resident’s diagnosis of Alzheimer’s disease or other dementia and the need for the resident to be served in a secured dementia care unit.

Description of Violation

Resident [redacted] Medical Evaluation dated [redacted], does not list a diagnosis of [redacted] or [redacted].

Plan of Correction

Accept [redacted] - 05/22/2025)

Resident Care Director faxed Document of Medical Evaluation to doctor same day for update. Resident Care Director was re-educated on regulation 231b on 05/07/2025. To ensure ongoing compliance weekly audits will be performed starting 05/12/2025 by the Resident Care Director.

Executive Director will sign weekly audits to verify compliance.

Licensee's Proposed Overall Completion Date: 07/07/2025

Implemented [redacted] 05/22/2025)