

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

September 24, 2025

[REDACTED]
MSA PLYMOUTH MEETING OPERATING, LLC
[REDACTED]
[REDACTED]

RE: THE PINNACLE AT PLYMOUTH
MEETING
215 PLYMOUTH ROAD
PLYMOUTH MEETING, PA, 19462
LICENSE/COC#: 15023

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/07/2025 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: THE PINNACLE AT PLYMOUTH MEETING License #: 15023 License Expiration: 06/23/2025
 Address: 215 PLYMOUTH ROAD, PLYMOUTH MEETING, PA 19462
 County: MONTGOMERY Region: SOUTHEAST

Administrator

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

Legal Entity

Name: MSA PLYMOUTH MEETING OPERATING, LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: 1 1 Date: 07/02/2020 Issued By: Plymouth Township
 Type: 1 2 Date: 07/02/2020 Issued By: Plymouth Township

Staffing Hours

Resident Support Staff: Total Daily Staff: 128 Waking Staff: 96

Inspection Information

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

Inspection Dates and Department Representative

07/07/2025 On Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 138 Residents Served: 97

Secured Dementia Care Unit
 In Home: Yes Area: Garden House Capacity: 19 Residents Served: 16

Hospice
 Current Residents: 7

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 97
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 31 Have Physical Disability: 0

Inspections / Reviews

07/07/2025 - Partial
 Lead Inspector: [REDACTED] Follow Up Type: POC Submission Follow Up Date: 08/01/2025

Inspections / Reviews (*continued*)

08/12/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/23/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 09/02/2025

09/19/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/23/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 09/22/2025

09/24/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/23/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

184b - Labeling OTC/CAM

1. Requirements

2600.

184.b. If the OTC medications and CAM belong to the resident, they shall be identified with the resident's name.

Description of Violation

On [redacted] at 10:41 a bottle of [redacted], belonging to resident [redacted] in room [redacted] was not labeled with the resident's name. The print on the label had worn away completely.

Plan of Correction

Accept [redacted] - 08/12/2025)

The [redacted] was immediately removed, and a new bottle with an intact label was ordered from the pharmacy.

Daily cart audits will be completed by the Medication Technicians, or Designee, from 7/15/25-10/15/25. Pharmacy labels will be reviewed to be sure they are intact and legible and identified with the resident's name.

Results of these audits will be reviewed at Quality Assurance Meetings from July to October 2025 per Meridian Senior Living Policy.

Licensee's Proposed Overall Completion Date: 08/31/2025

Implemented ([redacted] - 09/24/2025)

185a - Implement Storage Procedures

2. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident [redacted] is prescribed two [redacted] tablets every six hours as needed. On [redacted] this medication was not available in the home.

Plan of Correction

Accept [redacted] - 08/12/2025)

Wellness Director, or Designee, will educate all Medication Technicians or nurses on or before August 31, 2025, regarding maintaining all PRN medication to ensure it is available upon request.

A Medication Administration Record to actual medications in the cart audit was performed by the Pharmacy Technician on 7/22/25 to ensure that all current physician orders had corresponding medications in the cart. Audit findings were reviewed with the Wellness Director and all missing items were ordered and present in the cart by 7/24/25.

Daily cart audits will be performed by the Medication Technician, or Designee, from 7/15/25-10/15/25 focusing on the storage, access, labeling, security and distribution of medication.

Results of these audits will be reviewed at Quality Assurance Meetings from July to October 2025 per Meridian Senior Living Guidelines.

Licensee's Proposed Overall Completion Date: 08/31/2025

185a Implement Storage Procedures (*continued*)

Implemented [REDACTED] - 09/24/2025)