

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

October 21, 2025

[REDACTED]
WALDEN'S VIEW NORTH HUNTINGDON OPCO LLC
[REDACTED]

RE: WALDEN'S VIEW AT NORTH
HUNTINGDON
7990 US ROUTE 30
NORTH HUNTINGDON, PA, 15642
LICENSE/COC#: 44680

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/29/2025 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: WALDEN'S VIEW AT NORTH HUNTINGDON **License #:** 44680 **License Expiration:** 11/26/2025
Address: 7990 US ROUTE 30, NORTH HUNTINGDON, PA 15642
County: WESTMORELAND **Region:** WESTERN

Administrator

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

Legal Entity

Name: WALDEN'S VIEW NORTH HUNTINGDON OPCO LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 134 **Waking Staff:** 101

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 07/29/2025

Inspection Dates and Department Representative

07/29/2025 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 100 **Residents Served:** 79

Secured Dementia Care Unit

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

Hospice

Current Residents: 6

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 77
Diagnosed with Mental Illness: 11 **Diagnosed with Intellectual Disability:** 2
Have Mobility Need: 55 **Have Physical Disability:** 0

Inspections / Reviews

07/29/2025 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 09/25/2025

09/26/2025 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 10/15/2025
Reviewer: [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 10/15/2025

Inspections / Reviews *(continued)*

10/21/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/15/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

17 - Record Confidentiality

1. Requirements

2600.

17. Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

Description of Violation

There was a green notebook, unattended, unsecured and accessible, on the medication cart parked by bedroom [redacted] containing multiple resident protected health information to include:

*Resident [redacted] reading and amount of [redacted] administered.

*Resident [redacted] medication refill order for [redacted] and [redacted].

Plan of Correction

Accept [redacted] - 09/26/2025)

In response to the violation on 7/29/25 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken by admin by removal of the green notebook from medication cart and educated med tech on shift on confidentiality requirements. Admin/designee will conduct an in-service training on regulation 17 on 9/30/2025 with all medication techs. Documentation will be kept. Admin/designee will conduct weekly audits of record storage areas for the 3 months and monthly there-after starting on 9/25/2025. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally during quality management meeting for continuous improvement purposes. The next quality management meeting will be held on 10/13/2025.

Licensee's Proposed Overall Completion Date: 10/13/2025

Implemented [redacted] - 10/21/2025)

85a - Sanitary Conditions

2. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

There was debris, dead insects, a used Q Tip and black mold/mildew on the floor beneath the Door 4 staircase.

Plan of Correction

Accept [redacted] - 09/26/2025)

In response to the violation on 7/29/25 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 7/29/25 by housekeeping. Housekeeping removed debris and swept and scrubbed the entire floor of the staircase by door 4. Admin/management did an in-service with all of housekeeping on regulation 85a on 7/30/25. Admin/designee will do weekly walk-thru for 3 months of building including stairwells to ensure sanitary conditions. Monthly thereafter. This was started on 9/25/25. Documentation will be kept. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally during quality management meeting for continuous improvement purposes. The next quality management meeting will be held on 10/13/2025.

Licensee's Proposed Overall Completion Date: 10/13/2025

85a - Sanitary Conditions *(continued)*

Implemented [REDACTED] - 10/21/2025)

87 - Lighting

3. Requirements

2600.

87. Lighting - The home's hallways, interior stairs, outside steps, outside doorways, porches, ramps, evacuation routes, outside walkways and fire escapes shall be lighted and marked to ensure that residents, including those with vision impairments, can safely move through the home and safely evacuate.

Description of Violation

The light fixture was broken with exposed wires, hanging from the ceiling, in the ground floor Door 4 stairwell.

Plan of Correction*Accept* [REDACTED] - 09/26/2025)

In response to the violation on 7/29/25 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 7/29/25 by maintenance director with repairs being completed on 7/30/25. Documentation was kept. Admin conducted an in-service training on 7/30/25 with maintenance director and maintenance crew on regulation 87. Documentation has been kept. Admin and maintenance director will do weekly walk thru for 3 months of the entire building to ensure compliance with regulation 87 and monthly thereafter. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally during quality management meeting for continuous improvement purposes. The next quality management meeting will be held on 10/13/2025.

Licensee's Proposed Overall Completion Date: 10/13/2025

Implemented [REDACTED] - 10/21/2025)