

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

January 13, 2026

[REDACTED], CEO
HOLY REDEEMER HEALTH SYSTEM
1616 HUNTINGDON PIKE
[REDACTED]
MEADOWBROOK, PA, 19046

RE: HOLY REDEEMER ST. JOSEPH
MANOR
1616 HUNTINGDON PIKE
MEADOWBROOK, PA, 19046
LICENSE/COC#: 12794

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/13/2025 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: *HOLY REDEEMER ST. JOSEPH MANOR* License #: *12794* License Expiration: *07/09/2026*
Address: *1616 HUNTINGDON PIKE, MEADOWBROOK, PA 19046*
County: *MONTGOMERY* Region: *SOUTHEAST*

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: *HOLY REDEEMER HEALTH SYSTEM*
Address: *1616 HUNTINGDON PIKE, [Redacted], MEADOWBROOK, PA, 19046*
Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Type: *C-1* Date: *12/23/1998* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *36* Waking Staff: *27*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *11/13/2025*

Inspection Dates and Department Representative

11/13/2025 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information			
License Capacity:	69	Residents Served:	36
Secured Dementia Care Unit			
In Home:	No	Area:	Capacity:
Residents Served:			
Hospice			
Current Residents: 0			
Number of Residents Who:			
Receive Supplemental Security Income:	0	Are 60 Years of Age or Older:	36
Diagnosed with Mental Illness:	4	Diagnosed with Intellectual Disability:	0
Have Mobility Need:	0	Have Physical Disability:	0

Inspections / Reviews

11/13/2025 - Full
Lead Inspector: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *12/18/2025*

Inspections / Reviews *(continued)*

01/07/2026 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/09/2026

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 01/13/2026

01/13/2026 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/09/2026

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

51 - Criminal Background Check

1. Requirements

2600.

51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

The home did not have a copy of the criminal background check documented on the PA State Police Request for Criminal Record Check form (SP4-164), or via the e-patch system for staff person A whose date of hire was [REDACTED]

Plan of Correction

Accept ([REDACTED] - 01/07/2026)

On 11/14, Administrator completed an audit of all Redeemer Personal Care direct and non-direct care staff to ensure appropriate background check form was on file for these staff members. Administrator acquired PA State Police Request for Criminal Record Check form (SP4-164) for staff person A. As an ongoing measure, the Administrator will review new hire paperwork within 24 hours of start date, to ensure PA State Police Request for Criminal Record Check form (SP4-164) is for all Redeemer Personal Care direct and non-direct care staff.

Licensee's Proposed Overall Completion Date: 12/16/2025

Implemented ([REDACTED] - 01/13/2026)

85a - Sanitary Conditions

2. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

On 11/1/2025, staff person B used resident #1's glucometer for resident #2.

Plan of Correction

Accept ([REDACTED] - 01/07/2026)

On 11/14 resident #1's glucometer was replaced. Nurse Manager completed audit of supplies and readings on 11/14. Additional labels were added to resident's glucometer to better distinguish who it belongs to. Nurse Manager completed education on 11/17 and 11/18 with all Redeemer Personal Care LPN's and medication technicians that are diabetic certified on glucometer use and documentation. As an ongoing measure, Nurse Manager will complete an audit of supplies and readings every 2 weeks.

Licensee's Proposed Overall Completion Date: 12/16/2025

Implemented ([REDACTED] - 01/13/2026)

132g - Fire Drills Days/Times

3. Requirements

2600.

132.g. Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

Description of Violation

The home routinely holds fire drills at the end of the month as evidenced by the following drills:

132g - Fire Drills Days/Times (continued)

- 4/23/2025
- 5/28/2025
- 6/27/2025
- 7/29/2025
- 8/28/2025
- 9/24/2025
- 10/27/2025

Repeated Violation: 11/4/2024

Plan of Correction

Accept (█ - 01/07/2026)

Per the regulation our fire drills are held on different days of the week and at different times of the day. To address the concerns of them being routinely held at the end of the month, as an ongoing measure, the Director of Engineering and Maintenance, who completes our monthly fire drills has modified █ tracking tool to include tracking the week & day of the month it is held so that it can be rotated throughout the month. This process will begin in January 2026.

Licensee's Proposed Overall Completion Date: 12/16/2025

Implemented (█ - 01/13/2026)

184a - Resident's Meds Labeled

4. Requirements

2600.

184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

1. The resident's name.
2. The name of the medication.
3. The date the prescription was issued.
4. The prescribed dosage and instructions for administration.
5. The name and title of the prescriber.

Description of Violation

On 11/13/2025, resident #2's Lantus Solostar Injection 100ML had the incorrect directions listed on the pharmacy label. The pharmacy label on the medication read "inject 40 units subcutaneously once daily." However, on 10/30/2025, that order was discontinued. The current order as of 10/31/2025 is to "inject 30 units subcutaneously once daily." There was no direction change sticker on the medication.

Plan of Correction

Accept (█ - 01/07/2026)

On 11/13, direction change sticker was immediately applied to pharmacy label. On 11/13 and 11/14, Nurse Manager completed audit on medication carts and verified pharmacy labels matched current orders. On 11/17 and 11/18, Nurse Manager completed education with all Redeemer Personal Care LPNs and Medication Technicians on regulation and protocol for when a medication order changes and medication rights related to checking and administration. As an ongoing measure, the night shift LPN will audit the medication carts nightly to ensure appropriate procedure is being followed for new/changed orders.

184a - Resident's Meds Labeled *(continued)*

Licensee's Proposed Overall Completion Date: 12/16/2025

Implemented (█) - 01/13/2026

185a - Implement Storage Procedures

5. 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

On 11/1/2025, resident #1's glucometer read 56 and the medication administration record for November 2025 shows that the blood glucose reading was documented as 59.

Plan of Correction

Accept (█) - 01/07/2026

On 11/14, Nurse Manager completed an audit of glucometer readings. Nurse Manager completed education on 11/17 and 11/18 with all Redeemer Personal Care LPN's and medication technicians that are diabetic certified on glucometer reading documentation. As an ongoing measure, Nurse Manager will complete an audit of glucometer readings every 2 weeks.

Licensee's Proposed Overall Completion Date: 12/16/2025

Implemented (█) - 01/13/2026

187d - Follow Prescriber's Orders

6. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #2 is prescribed blood glucose checks two times a day before breakfast at 6:00 am and before dinner at 4:00 pm. However, resident #2's blood sugar was checked at 8:24 am on 11/1/2025.

Plan of Correction

Accept (█) - 01/07/2026

On 11/14, Nurse Manager completed an audit of readings compared to orders. Nurse Manager completed education on 11/17 and 11/18 with all Redeemer Personal Care LPN's and medication technicians that are diabetic certified on following orders and documentation of readings. As an ongoing measure, Nurse Manager will complete an audit of glucometer readings every 2 weeks.

Licensee's Proposed Overall Completion Date: 12/16/2025

Implemented (█) - 01/13/2026