

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

February 9, 2026

[REDACTED]  
PHILLIPSBURG SNF OPCO LLC  
[REDACTED]

RE: HERITAGE RIDGE SENIOR LIVING AT  
WINDY HILL  
250 DOGWOOD DRIVE  
PHILIPSBURG, PA, 16866  
LICENSE/COC#: 23281

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/13/2026 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 RIDGE SENIOR LIVING AT WINDY HILL License #: 23281 License Expiration: 02/10/2026  
 Address: 250 DOGWOOD DRIVE, PHILIPSBURG, PA 16866  
 County: CENTRE Region: NORTHEAST

**Administrator**

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

**Legal Entity**

Name: PHILLIPSBURG SNF OPCO LLC  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: Other Date: 03/03/2006 Issued By: Williams Inspection Svc

**Staffing Hours**

Resident Support Staff: Total Daily Staff: 13 Waking Staff: 10

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #:  
 Reason: Complaint Exit Conference Date: 01/13/2026

**Inspection Dates and Department Representative**

01/13/2026 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 16 Residents Served: 13  
 Secured Dementia Care Unit  
 In Home: No Area: Capacity: Residents Served:  
 Hospice  
 Current Residents: 0  
 Number of Residents Who:  
 Receive Supplemental Security Income: 2 Are 60 Years of Age or Older: 13  
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 0 Have Physical Disability: 0

**Inspections / Reviews**

01/13/2026 Partial  
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/05/2026

02/03/2026 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: 02/09/2026  
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/10/2026

Inspections / Reviews (*continued*)

02/05/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/09/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 02/12/2026

02/09/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/09/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

16c - Written Incident Report

1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

Resident # [redacted] did not receive their prescribed [redacted] on [redacted] at 9 p.m. and on [redacted] through [redacted] at 9 a.m. and 9 p.m. The home did not report the medication error to Bureau of Human Services Licensing.

Plan of Correction

Accept [redacted] - 02/03/2026)

Facility submitted the identified late incident reporting form to the Bureau of Human Services Licensing. Staff are currently being educated on the appropriate need for reporting such incidents on a real-time basis. The education is being performed by [redacted] DON of our skilled facility and [redacted] is utilizing the Medication Course material, Lesson 7 – Administration, Lesson 8 – Documentation, and Lesson 9a – Medication Errors Medication Administrator. Education will be completed by February 9, 2026. Monitoring of the reporting of medication error reporting will be conducted on seven (7) separate charts by the Personal Care Home Manager (Administrator in Training) on a weekly basis for one month then monthly for three months. Findings will be reported to the Executive Director for inclusion in the Quality Assurance and Performance Improvement committee.

Licensee's Proposed Overall Completion Date: 02/09/2026

Implemented [redacted] 02/09/2026)

141b1 - Annual Medical Evaluation

2. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident [redacted]'s annual medical evaluation was not dated showing the date the person was evaluated and when the form was completed.

Repeat Violation: [redacted]

Plan of Correction

Accept [redacted] 02/03/2026)

Resident [redacted] annual medication evaluation was dated to eliminate the error on the form. Staff are being educated on the regulatory requirements of the Documentation of Medical Evaluation requirements by [redacted] DON using the regulatory requirements of 2600-141 and will be completed by February 9, 2026. Monitoring of the regulatory requirements of the Documentation of Medical Evaluation will be conducted on seven (7) separate charts by the Personal Care Home Manager (Administrator in Training) on a weekly basis for one month then monthly for three months. Findings will be reported to the Executive Director for inclusion in the Quality Assurance and Performance Improvement committee.

Licensee's Proposed Overall Completion Date: 02/09/2026

Implemented [redacted] - 02/09/2026)

187b - Date/Time of Medication Admin.

3. Requirements

2600.

187b - Date/Time of Medication Admin. (continued)

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

On [redacted], resident [redacted] medication [redacted]. Give 10 mg by mouth every morning and at bedtime for dx: [redacted], was not available according to staff interviews and documentation. However, it was documented in the medication administration record as administered at 8 a.m. on [redacted] and [redacted]

Plan of Correction

Accept [redacted] - 02/05/2026)

The facility submitted a late incident reporting form to the Bureau of Human Services Licensing for resident [redacted]. Education for this plan of correction is being performed by [redacted] DON of our skilled facility and for this particular incident [redacted] has included Lesson 8 – Documentation as part of the overall educational material emphasizing the importance of correctly documenting when a medication is actually provided and not documenting inaccurate facts. Education and training will be concluded on all noncompliant items on 2/9/2026. Monitoring of the appropriate documentation of medication administration will begin the week of 2/10/2026 and will be conducted by the Personal Care Home Manager (Administrator in Training) on seven (7) individual charts a weekly basis for one month then monthly for three months. Findings will be reported to the Executive Director for inclusion in the Quality Assurance and Performance Improvement committee.

Licensee's Proposed Overall Completion Date: 02/09/2026

Implemented [redacted] - 02/09/2026)

187d - Follow Prescriber's Orders

4. Requirements

2600.

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

Description of Violation

Resident [redacted] Give 1 tablet by mouth every morning and at bedtime, was not available and not administered at 9 p.m. on [redacted] or on [redacted] through [redacted] at 9 a.m. and 9 p.m. because it was not available.

Plan of Correction

Accept [redacted] - 02/05/2026)

Facility submitted a late incident reporting form to the Bureau of Human Services Licensing identifying the awareness of the missing medication and error in reporting the administration. The education plan being provided by [redacted] DON of our skilled facility is focusing on the portion of the regulation guidelines 2600-187, Medication Course material emphasizing the importance of accurate documentation and reporting of missing medications. This material includes information from the course lessons; Lesson 7 – Administration, Lesson 8 – Documentation, and Lesson 9a – Medication Errors Medication Administrator. Education/training will be completed by February 9, 2026. Monitoring of this corrective process will begin during the week of 2/10/26. Monitoring of following the prescriber's direction, accuracy and the reporting of medication error reporting will be conducted on seven (7) separate charts by the Personal Care Home Manager (Administrator in Training) on a weekly basis for one month then monthly for three months. Findings will be reported to the Executive Director for inclusion in the Quality Assurance and Performance Improvement committee.

187d Follow Prescriber's Orders (*continued*)

Licensee's Proposed Overall Completion Date: 02/09/2026

Implemented (█) - 02/09/2026