

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

March 16, 2026

[REDACTED], CAMPUS DIRECTOR
REDSTONE PRESBYTERIAN SENIORCARE
[REDACTED]
[REDACTED]

RE: REDSTONE HIGHLANDS
12921 REDSTONE DRIVE
NORTH HUNTINGDON, PA, 15642
LICENSE/COC#: 44337

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/15/2026 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: REDSTONE HIGHLANDS License #: 44337 License Expiration: 06/17/2026
 Address: 12921 REDSTONE DRIVE, NORTH HUNTINGDON, PA 15642
 County: WESTMORELAND Region: WESTERN

Administrator

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

Legal Entity

Name: REDSTONE PRESBYTERIAN SENIORCARE
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 05/21/2023 Issued By: L&I
 Type: I-2 Date: 05/21/2021 Issued By: N. Huntingdon Twp.

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 77 Waking Staff: 58

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
 Reason: Renewal, Complaint, Incident Exit Conference Date: 01/26/2026

Inspection Dates and Department Representative

01/15/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 54 Residents Served: 46
 Secured Dementia Care Unit
 In Home: Yes Area: 2nd Floor Capacity: 20 Residents Served: 20
 Hospice
 Current Residents: 8
 Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 46
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 31 Have Physical Disability: 0

Inspections / Reviews

01/15/2026 - Full
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/23/2026

03/05/2026 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 03/12/2026
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 03/13/2026

Inspections / Reviews *(continued)*

03/16/2026 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/12/2026

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

85a - Sanitary Conditions

1. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

There was a smear of feces, measuring approximately ¾ of an inch long, on the shower chair in the private bathroom in bedroom #2217.

Plan of Correction

Accept (█) - 03/05/2026)

On 1/15/2026 all staff were educated on regulation 85a. On 1/15/2026 PCHA designee immediately cleaned and sanitized the shower chair in the private bathroom in bedroom #2217. PCHA designee conducted a random audit of resident rooms on 1/15/2026 to ensure compliance with regulation 85a.

PCHA or designee will conduct 5 random resident room audits a week for 4 weeks, and then 5 random resident room audits monthly for three months to ensure ongoing compliance with regulation 85a. Documentation of these audits shall be retained by the PCHA.

Education on regulation 2600.85a will continue with staff monthly for 3 months and then annually thereafter. PCHA will retain documentation of the staff education in accordance with 2600.65i. The monthly staff training shall begin on 1/15/2026 and shall include training for all current staff persons.

Licensee's Proposed Overall Completion Date: 03/12/2026

Implemented (█) - 03/16/2026)

183e - Storing Medications

2. Requirements

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

Resident #1's Humalog Kwik Pen was opened on 12/12/25; however, the manufacturer indicates the medication expires 28 days after it is opened.

Plan of Correction

Accept (█) - 03/05/2026)

On 1/15/2026 all staff were educated on regulation 183e. On 1/15/2026 PCHA immediately removed the expired Humalog pen from the cart. PCHA designee conducted a whole house audit of medication carts on 1/15/2026 to ensure compliance with regulation 183e. On 1/16/2026 PCHA assigned nursing staff monthly cart audits to ensure ongoing compliance with regulation 183e.

PCHA or designee will conduct 5 random audits a week for 4 weeks, and then 5 random audits monthly for three months to ensure ongoing compliance with regulation 183e. Documentation of these audits shall be retained by the PCHA.

Education on regulation 2600.183e will continue with staff monthly for 3 months and then annually thereafter. PCHA will retain documentation of the staff education in accordance with 2600.65i. The monthly staff training

183e - Storing Medications (continued)

shall begin on 1/15/2026 and shall include training for all current staff persons

Licensee's Proposed Overall Completion Date: 03/12/2026

Implemented (█) - 03/16/2026