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

July 23, 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 05/19/2026, 05/29/2026, 06/01/2026, 06/05/2026 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: *HERITAGE RIDGE SENIOR LIVING AT WINDY HILL* **License #**: *23281* **License Expiration**: *02/10/2027*

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

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff**: *11* **Waking Staff**: *8*

Inspection Information

Type: *Partial* **Notice**: *Unannounced* **BHA Docket #**:

Reason: *Complaint, Interim* **Exit Conference Date**: *06/05/2026*

Inspection Dates and Department Representative

05/19/2026 - On-Site: [redacted]
05/29/2026 - Off-Site: [redacted]
06/01/2026 - Off-Site: [redacted]
06/05/2026 - Off-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *16* **Residents Served**: *11*

Secured Dementia Care Unit

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

Hospice

Current Residents: *1*

Number of Residents Who:

Receive Supplemental Security Income: *0* **Are 60 Years of Age or Older**: *11*

Diagnosed with Mental Illness: *0* **Diagnosed with Intellectual Disability**: *0*

Have Mobility Need: *0* **Have Physical Disability**: *0*

Inspections / Reviews

05/19/2026 Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *07/17/2026*

Inspections / Reviews *(continued)*

07/13/2026 POC Submission

Submitted By: [redacted] **Date Submitted:** *07/21/2026*

Reviewer: [redacted] **Follow Up Type:** *POC Submission* **Follow Up Date:** *07/20/2026*

07/14/2026 POC Submission

Submitted By: [redacted] **Date Submitted:** *07/21/2026*

Reviewer: [redacted] **Follow Up Type:** *Document Submission* **Follow Up Date:** *07/22/2026*

07/23/2026 Document Submission

Submitted By: [redacted] **Date Submitted:** *07/21/2026*

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] has an order for [redacted] to be applied to the lower back in the morning for pain, may apply 2 patches daily. On in the a.m. and off in HS. This medication was not available and administered on [redacted] at 9:00 a.m., [redacted] at 9:00 a.m. The medication error was not reported to the Department.

Repeated Violation: [redacted]

Plan of Correction ***Accept [redacted] - 07/14/2026)***

On 7/13/2026, All medication staff were re-educated on DHS reporting requirements. A Medication Availability Checklist was implemented requiring staff to verify medication availability during each medication cart check. Missing medications are immediately reported to the Administrator for follow-up. The Administrator will audit all medication incidents weekly starting 7/13/2026 for 90 days.

Licensee's Proposed Overall Completion Date: *07/13/2026*

Implemented [redacted] - 07/23/2026)

181c Self administration Assessment

2. Requirements

2600.
181.c. The resident's assessment shall identify if the resident is able to self administer medications as specified in § 2600.227(e) (relating to development of the support plan). A resident who desires to self administer medications shall be assessed by a physician, physician's assistant or certified registered nurse practitioner regarding the ability to self administer and the need for medication reminders.

Description of Violation

Resident #[redacted] has an order for [redacted] – 1 spray in both nostrils as needed for allergies and [redacted] every 6 hours as needed for shortness of breath. These medications were not found in the cart. The Administrator stated the [redacted] was in their room, and the [redacted] was in the resident's walker. Per Resident [redacted] Medical Evaluation dated [redacted], the resident is not able to self-administer medication.

Resident [redacted] had [redacted] in their room. The resident requires assistance in the medications being offered at the prescribed times of administration per the Medical Evaluation dated [redacted].

Plan of Correction ***Accept [redacted] - 07/14/2026)***

On 7/13/2026 Medications found in resident rooms and walkers were immediately removed and secured. Resident assessments were reviewed to verify self-administration status. Staff were re-educated on 7/8/2026 regarding

181c Self administration Assessment (continued)

self administration requirements. Monthly room audits will be completed by the Administrator for 90 days starting 7/13/2026.

Licensee's Proposed Overall Completion Date: *07/13/2026*

Implemented [redacted] - 07/23/2026)

183a - Original Containers and Injections

3. Requirements

2600.
183.a. Prescription medications, OTC medications and CAM shall be kept in their original labeled containers and may not be removed more than 2 hours in advance of the scheduled administration. Assistance with insulin and epinephrine injections and sterile liquids shall be provided immediately upon removal of the medication from its container.

Description of Violation

At 11:55 a.m. there was a cup of medications for Resident [redacted]1 in the top drawer of the medication cart. Per staff person A, the medication cup contained Resident [redacted]'s 12:00 p.m. medications and their 1:30 p.m. medications that were to be administered at lunch.

Plan of Correction ***Directed [redacted] - 07/14/2026)***

The medications prepared in advance were discarded and re prepared at the correct administration time. Staff were re educated on 7/13/2026 that medications may not be removed from original containers more than two hours prior to administration. Medication pass observations will be completed weekly starting 7/13/2026 by Administrator for 90 days.

Proposed Overall Completion Date: 07/13/2026

(Directed)
All medication trained staff members will be educated on the requirements under 2600.182c and 2600.183a1 to include medication is to not be poured prior to administration. The steps of medication administration should be followed. The Administrator will observe three medication passes per week with different staff and on different shifts for 4 weeks starting the 7/15/26, then monthly thereafter. The observations and training will be maintained for the Department to review upon request.

Directed Completion Date: *07/22/2026*

Implemented [redacted] - 07/23/2026)

183d - Prescription Current

4. Requirements

2600.
183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

Resident [redacted] had [redacted] in the cart. This medication was discontinued on [redacted].

Resident [redacted] had [redacted] tablet in the cart. This medication was discontinued on [redacted]

183d - Prescription Current *(continued)*

Plan of Correction ***Accept [redacted] 07/14/2026)***

On 5/19/2026 Discontinued medications were immediately removed from the medication cart and properly disposed of. A complete medication cart audit was performed. Staff were re-educated 7/13/2026 regarding removal of discontinued medications. Weekly medication cart audits will be completed by Administrator for 90 days starting 7/13/2026.

Licensee's Proposed Overall Completion Date: *07/13/2026*

Implemented [redacted] - 07/23/2026)

183e - Storing Medications

5. 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 [redacted] and Resident # [redacted] had [redacted] in the medication cart, that did not have an open date. As per the manufacturer's instructions, the pens expire 28 days after opening.

Plan of Correction ***Accept [redacted] - 07/14/2026)***

All insulin pens were immediately dated upon opening. On 7/13/2026 Staff were educated on the manufacturer's storage requirements. Weekly medication storage audits will be conducted by Administrator for 90 days starting 7/13/2026.

Licensee's Proposed Overall Completion Date: *07/13/2026*

Implemented [redacted] - 07/23/2026)

184a - Resident's Meds Labeled

6. Requirements

2600.
184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:
4. The prescribed dosage and instructions for administration.

Description of Violation

Resident [redacted] has an order for [redacted] take 1 tablet by mouth every 4 hours as needed for nausea and vomiting. The medication bottle incorrectly indicates take every 6 hours.

Plan of Correction ***Accept [redacted] - 07/14/2026)***

The pharmacy was contacted 5/19/2026 and the incorrect medication label was corrected before further administration. Medication labels were audited against physician orders. On 7/13/2026 Staff were educated to report discrepancies immediately. Five resident medication profiles will be audited weekly by the Administrator for 90 days starting 7/13/2026.

Licensee's Proposed Overall Completion Date: *07/13/2026*

Implemented [redacted] - 07/23/2026)

185a - Implement Storage Procedures

7. 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] has an order for [redacted], 17 grams by mouth as needed for constipation. This medication was not available on site.

Resident [redacted] glucometer was not calibrated to the correct time of day. At 10:42 a.m. the glucometer indicated 9:42 a.m.

Plan of Correction ***Accept [redacted] - 07/14/2026)***

The unavailable medication was obtained on 5/20/2026, the glucometer time was corrected, and all glucometers were checked. Weekly medication inventory and equipment audits will be completed by the Administrator for 90 days starting 7/13/2026.

Licensee's Proposed Overall Completion Date: *07/13/2026*

Implemented ([redacted] - 07/23/2026)

187d Follow Prescriber's Orders

8. Requirements

2600.
187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident [redacted] has an order for [redacted] to be applied to the lower back in the morning for pain, may apply 2 patches daily. On in the a.m. and off in HS. This medication was not available and administered on [redacted] at 9:00 a.m., [redacted] at 9:00 a.m.

Repeated Violation: [redacted]

Plan of Correction ***Accept [redacted] - 07/14/2026)***

The medication was obtained. Staff were re-educated on 7/13/2026 regarding following prescriber orders and reporting unavailable medications. Daily medication availability checks have been implemented. Weekly audits will be completed by the Administrator for 90 days starting 7/13/2026.

Licensee's Proposed Overall Completion Date: *07/13/2026*

Implemented ([redacted] - 07/23/2026)

188b Medication Error Reporting

9. Requirements

2600.
188.b. A medication error shall be immediately reported to the resident, the resident's designated person and the prescriber.

Description of Violation

Resident [redacted] has an order for [redacted] to be applied to the lower back in the morning for pain, may apply 2 patches daily. On in the a.m. and off in HS. This medication was not available and administered on [redacted] at 9:00

188b - Medication Error Reporting (continued)

a.m., [redacted] at 9:00 a.m. This medication error was not reported to the resident, the designee, or the prescriber.

Plan of Correction ***Accept [redacted] - 07/14/2026)***

The medication was obtained. Staff were educated on 7/13/2026 regarding medication error reporting requirements. All medication errors will be reviewed weekly by the Administrator for 90 days starting 7/13/2026.

Licensee's Proposed Overall Completion Date: *07/13/2026*

Implemented ([redacted] - 07/23/2026)

227c - Support Plan Revision

10. Requirements

2600.
227.c. The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment.

Description of Violation

Resident [redacted] Assessment and Support Plan dated [redacted] is not the Department's standard form. The form the home is using does not include the mandatory information of; the frequency of the item, the level of assistance the resident requires or who is responsible for providing the assistance.

Resident [redacted] Assessment and Support Plan dated [redacted] is not the Department's standard form. The form the home is using does not include the mandatory information of; the frequency of the item, the level of assistance the resident requires or who is responsible for providing the assistance.

Plan of Correction ***Accept [redacted] - 07/14/2026)***

Resident support plans were updated using the Department-approved format. All support plans were audited 7/13/2026 for compliance. Future assessments will utilize only the Department-approved forms. The Administrator will review all new and annual support plans for 90 days starting 7/13/2026.

Licensee's Proposed Overall Completion Date: *07/13/2026*

Implemented [redacted] - 07/23/2026)