



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to HOMESTEAD HEIGHTS OF NEW BERLIN

LEGAL ENTITY

To operate HOMESTEAD HEIGHTS OF NEW BERLIN

NAME OF FACILITY OR AGENCY

Located at 7776 STATE ROUTE 304, MIFFLINGBURG, PA 17844

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE/SERVICE LOCATION

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To provide Assisted Living

TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 33

or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: _____

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2800: Assisted Living Residences

(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from September 10, 2026 until September 10, 2027,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **234310**


ISSUING OFFICER


DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable
and should be posted in a conspicuous place in the facility.

HS 628 – 04/23



Pennsylvania Department of Human Services

Emailing Date: September 10, 2026

[REDACTED]
Homestead Heights of New Berlin
[REDACTED]

RE: Homestead Heights of New Berlin
7776 State Route 304
Mifflinburg, Pennsylvania 17844
License #: 234310

Dear [REDACTED]:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspections on August 13, 2026 of the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa. Code Ch. 2800 (relating to Assisted Living Residences), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because the home is new and not yet serving four or more residents.

In accordance with 55 Pa. Code § 2800.11(b) (relating to procedural requirements for licensure or approval of assisted living residences) a re-inspection of your newly licensed facility will be conducted within 3 months of the effective date of this license. Complete compliance with all applicable regulations is required in order to maintain your license.

During the inspection, citations on the enclosed Licensing Inspection Summary were found. All citations specified on the Licensing Inspection Summary must be corrected by the dates specified on the Licensing Inspection Summary and continued compliance with 55 Pa.Code Ch. 2800 must be maintained.

Your NEW license is enclosed, based on substantial but not complete compliance with 55 Pa.Code Ch. 2800.

Sincerely,

A handwritten signature in dark ink, reading "Juliet Marsala". The signature is written in a cursive, flowing style.

Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosures
License
Licensing Inspection Summary

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

September 4, 2026

[REDACTED]
HOMESTEAD HEIGHTS OF NEW BERLIN
[REDACTED]
[REDACTED]

RE: HOMESTEAD HEIGHTS OF NEW
BERLIN
7776 STATE ROUTE 304
MIFFLINGBURG, PA, 17844
LICENSE/COC#: 23431

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/13/2026 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: *HOMESTEAD HEIGHTS OF NEW BERLIN* License #: *23431* License Expiration:

Address: *7776 STATE ROUTE 304, MIFFLINGBURG, PA 17844*

County: *UNION* Region: *NORTHEAST*

Administrator

Name: [REDACTED]

Legal Entity

Name: *HOMESTEAD HEIGHTS OF NEW BERLIN*

Address: [REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *05/28/2026* Issued By: *Central Keystone*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *3* Waking Staff: *2*

Inspection Information

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

Reason: *New* Exit Conference Date: *08/13/2026*

Inspection Dates and Department Representative

08/13/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *33* Residents Served: *3*

Special Care Unit

In Residence: *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: *3*

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

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

Inspections / Reviews

08/13/2026 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *09/05/2026*

09/01/2026 - POC Submission

Submitted By: [REDACTED] Date Submitted: *09/02/2026*

Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *09/08/2026*

Inspections / Reviews (*continued*)

09/02/2026 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/02/2026

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 09/09/2026

09/03/2026 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/02/2026

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

18 Other laws, regs, ordins.**1. Requirements**

2800.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

There was no influenza poster posted in the home.

Plan of Correction**Accept ([REDACTED] - 08/28/2026)**

The Administrator posted an influenza poster in the entry way bulletin board on the day of inspection August 13 at approximately 11:30 am.

On August 26, the Administrator trained the DON and CNA about the importance of keeping the influenza poster posted.

The Administrator will check quarterly to make sure all required postings are posted.

Licensee's Proposed Overall Completion Date: 08/26/2026

Implemented ([REDACTED] - 09/02/2026)**85d Trash cans – kitchen/bath****2. Requirements**

2800.

- 85.d. Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

Description of Violation

At approximately 9:50 a.m., there was an uncovered, unattended garbage can that contained trash in the kitchen.

Plan of Correction**Accept ([REDACTED] - 08/28/2026)**

The Administrator purchased 2 trash can lids for our big trash cans in the kitchen on the day of inspection August 13 at approximately 11:30 am. The trash cans are now covered.

On August 26, the Administrator trained the Culinary Leader about the importance of keeping the trash cans in the Kitchen covered.

The Administrator will check quarterly to make sure all Trash cans are covered.

Licensee's Proposed Overall Completion Date: 08/27/2026

Implemented ([REDACTED] - 09/02/2026)**100a Exterior – free of hazards****3. Requirements**

2800.

- 100.a. The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

Description of Violation

The home has an outdoor gas fire pit with no screens to prevent access to open flames.

There is a large body of water adjacent to the home that is not fully surrounded by a fence. The water is at the bottom of a steep decline that is accessible to residents outside of the building.

100a Exterior – free of hazards (continued)**Plan of Correction****Accept** [REDACTED] - 09/02/2026)*Fire pit*

The Administrator purchased screen which proved to be too small. We are returning the screen and purchasing a bigger screen as shown in attachment for the fire pit. In the meantime, we shut the gas off to the fire pit so it is not operable.

Fence

The Maintenance man ordered an extension to the fence to wrap all the way around the back of the building with Buffalo Valley Fence. In the meantime, the maintenance man put temporary fence up to prevent anybody from going back there. see attached pictures.

On August 26, the administrator trained the maintenance department on the importance of keeping the firepit covered and keeping the grounds safe.

On September 1st 12:00 pm, the administrator trained the maintenance department to check once a month to make sure the fire pit cover does not get too hot when the fire is on.

The Administrator will check quarterly to make sure the fire pit remains covered.

Licensee's Proposed Overall Completion Date: 09/01/2026

Implemented [REDACTED] - 09/02/2026)**103f Fridge/Freezer Temps****4. Requirements**

2800.

103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

Description of Violation

There were no thermometers in the refrigerator or freezers located in the gathering place and conference room.

Plan of Correction**Accept** [REDACTED] - 08/28/2026)

The Administrator purchased 4 thermometers on 8/26 and put them into the fridges and freezers.

On August 26, the administrator trained the Culinary Leader on the importance of keeping the right temps in the fridges and freezers.

The Kitchen staff will check every week to make sure the temps stay where they should be. There is a documentation sheet that they have to fill out each week.

Licensee's Proposed Overall Completion Date: 08/27/2026

Implemented [REDACTED] - 09/02/2026)**105g Dryer lint removal**

5. Requirements

2800.

105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

Description of Violation

The home's two dryers located in the laundry room by the kitchen, had a 3/8 of an inch accumulation of lint covering the entire lint screen.

Plan of Correction**Accept** [REDACTED] - 08/28/2026)

On August 13, right after the inspection the Maintenance man cleaned all the dryer lint at 3:30.

On August 26, the administrator trained the DON on the importance of cleaning the dryer lint after every use..

The laundry personnel will clean the lint after every use . There is a documentation sheet that they have to fill out every time. see attached.

Licensee's Proposed Overall Completion Date: 08/27/2026

Implemented [REDACTED] - 09/02/2026)

129a Fireplace screens

6. Requirements

2800.

129.a. A fireplace must be securely screened or equipped with protective guards while in use.

Description of Violation

At approximately 9:35 a.m., the gas fireplace located in the main entrance living space, and the fireplace located in the Gathering Place room had a screened glass exterior. However, the exterior was hot when touched and there were no screens preventing access to the glass exterior.

Plan of Correction**Accept** [REDACTED] - 09/02/2026)

On August 13, the administrator ordered 2 protective screens for both fire places. See attached.

On September 1, The Administrator trained the Activity Director to make sure the fire place covers are in place before turning the fireplace on.

Licensee's Proposed Overall Completion Date: 09/01/2026

Implemented [REDACTED] - 09/02/2026)

182c Medication administration

7. Requirements

2800.

182.c. Medication administration includes the following activities, based on the needs of the resident:

1. Identify the correct resident.
6. Place the medication in the resident's hand, mouth or other route as ordered by the prescriber, in accordance with the limitations specified in subsection (b)(4).

182c Medication administration (continued)**Description of Violation**

At approximately 11:43 a.m., one Atorvastatin 40 mg tablet was in an unlabeled disposable medication cup in the top drawer of the medication cart. This medication was scheduled to be administered to Resident #1 at 12:00 p.m. The steps of medication administration were not followed.

Plan of Correction**Accept ([REDACTED] - 09/02/2026)**

Immediate action was taken on August 13, by the DON to ensure that the medication was administered properly.

On August 13, The DON trained the caregivers on how to properly administer medication. The following steps of administration of medication was reviewed with caregivers. Right individual; Right medication; Right dose; Right time; Right route. Instructed caregivers that once medication is removed from the original package it must be administered immediately.

The Administrator and the DON will make sure all med techs get the proper training they need. The DON will review it every 6 months to make sure the caregivers are administering medications properly

Licensee's Proposed Overall Completion Date: 09/01/2026**Implemented ([REDACTED] - 09/02/2026)**