

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

September 30, 2026

[REDACTED]
HIDDEN MEADOWS OPCO LLC

[REDACTED]
WHITE OAK HEALTHCARE REIT
[REDACTED]

RE: HIDDEN MEADOWS ON THE RIDGE
THE LAURELS
340 FARMERS LANE
SELLERSVILLE, PA, 18960
LICENSE/COC#: 14524

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/31/2026 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: HIDDEN MEADOWS ON THE RIDGE THE LAURELS **License #:** 14524 **License Expiration:** 07/20/2027
Address: 340 FARMERS LANE, SELLERSVILLE, PA 18960
County: BUCKS **Region:** SOUTHEAST

Administrator

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

Legal Entity

Name: HIDDEN MEADOWS OPCO LLC

Address: [REDACTED]

Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: **Total Daily Staff:** 64 **Waking Staff:** 48

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint, Incident **Exit Conference Date:** 08/31/2026

Inspection Dates and Department Representative

08/31/2026 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 50 **Residents Served:** 32

Secured Dementia Care Unit

In Home: Yes **Area:** whole home **Capacity:** 50 **Residents Served:** 32

Hospice

Current Residents: 1

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 32
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 32 **Have Physical Disability:** 0

Inspections / Reviews

08/31/2026 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 09/27/2026

09/30/2026 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 09/30/2026
Reviewer: [REDACTED] **Follow-Up Type:** Bypass Document Submission

Inspections / Reviews *(continued)*

09/30/2026 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/30/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

231c - Preadmission Screening

1. Requirements

2600.

231.c. A written cognitive preadmission screening completed in collaboration with a physician or a geriatric assessment team and documented on the Department's preadmission screening form shall be completed for each resident within 72 hours prior to admission to a secured dementia care unit.

Description of Violation

Resident [REDACTED] was admitted to the Secure Dementia Care Unit (SDCU) on [REDACTED]. However, the resident's written cognitive preadmission screening was not completed.

Plan of Correction

Accept [REDACTED] - 09/30/2026)

- On 8/31/26, immediately after the conclusion of the inspection, the preadmission screening for resident [REDACTED] which was completed on 6/19/26 and included a cognitive screening, was located, emailed to the inspector then properly filed in resident [REDACTED]'s chart.
- On 8/31/26, Division Director of Resident Care (DDRC) retrained the Executive Director (ED) on the requirements of regulation 231c and ensuring resident records are accurate, complete and filed appropriately.
- On 8/31/26, after being retrained, the ED retrained the Director of Health and Wellness (DHW), Assistant Director of Health and Wellness (ADHW) and Memory Care Director (MCD) on the requirements of regulation 231c and ensuring resident records are accurate, complete and filed appropriately.
- Since all residents have the potential to be impacted, between 9/1/26 – 9/11/26, the MCD audited all current resident records to ensure there is a timely, accurate and complete preadmission screening, which includes a cognitive screening, properly filed in each resident's chart.
- Starting 9/14/26, the ADHW, MCD or designee will audit all new resident charts for a timely, accurate and complete preadmission screening, including a cognitive screening, weekly for 12 weeks. If any areas of concern are identified through these audits, they will be corrected immediately and additional staff education will be provided, if applicable.
- Starting in October 2026, the ED or designee will review the preadmission screening audits completed by the ADHW, MCD or designee monthly for 3 months to ensure ongoing compliance with regulation 231c. The findings will be reviewed as part of the community's Quality Management Plan.

R/P Assistant DHW/MCD/ED/ Designee

Licensee's Proposed Overall Completion Date: 09/25/2026

Implemented [REDACTED] - 09/30/2026)