



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

Sent via email to: [REDACTED]  
**MAILING DATE: October 31, 2012**

Mr. Walter J. Kielar, Sr. Vice-President  
5485 Perkiomen Avenue Operations LLC  
Berkshire Commons, Genesis healthcare  
5485 Perkiomen Avenue  
Reading, Pennsylvania 19606

Dear Mr. Kielar

As a result of the Department of Public Welfare's (Department) licensing inspection on August 6, 2012 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Human Services Licensing so that compliance can be verified.


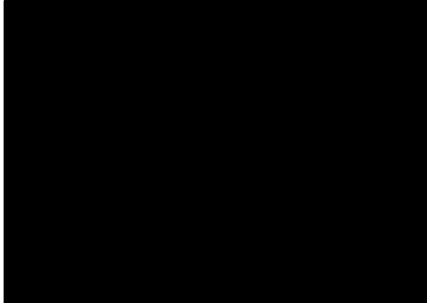
Sincerely,

A handwritten signature in black ink that reads "Michele Moskalczyk".

Michele Moskalczyk  
Regional Licensing Administrator

Enclosure  
Violation Report

**VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: BERKSHIRE COMMONS GENESIS HEALTHCARE		License Number: 221990
Address: 5485 PERKIOMEN AVENUE, READING, PA 19606		County: Berks
Administrator: Lee Dwinal		Region: NORTH
Legal Entity Name: 5485 PERKIOMEN AVENUE OPERATIONS LLC		
Legal Entity Address: 5485 PERKIOMEN AVENUE, READING, PA 19606		
Certificate(s) of Occupancy C-2 LP 08/14/1997 Department of L&I		
Staffing Hours Resident Support: Total Daily Staff: 102 Waking Staff: 77		
Type of Inspection: Partial BHA Docket Number: Notice: Unannounced		
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 08/06/2012: Hummel, Jesse		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details: Partial or Full Triggers: Random Indicators:		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 75 Number of Residents Served: 66 Secured Dementia Care Unit in Home: Yes Area: Secured Dementia Unit Capacity, if Applicable: 29 	Number of Residents who: 	

Violation Report: 22199 - 08/06/2012 - Hummel, Jesse  
 PCH Name: BERKSHIRE COMMONS GENESIS HEALTHCARE

**1. REGULATION 55 Pa.Code §2600**

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 section 2600.15 (relating to abuse reporting covered by law).

**2a. DESCRIPTION OF VIOLATION**

On Saturday 7/28/12 at 7:10pm, the homes fire alarm system was activated due to smoke created by a residents family member broiling a steak in the kitchen located in the home's activity area. The home did not report this incident to the Department until 7/30/12 at 7:41am, which is not within the required 24 hours.

**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)**

*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

All incidents requiring reporting will be reported within 24 hours. Staff was inserviced on 8/14/12 during a staff meeting on the requirements of reporting incidents in a timely manner. All staff will be re-inserviced by 8/31/12. ED will monitor incidents to ensure compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Lee Dwinjal*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) LEE DWINJAL ED	Date 8/29/12
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of 10-12-12  
 (Date)

Plan of correction implementation status as of 10-12-12  
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by *[Signature]*  
 (Initials)

Violation Report: 22199 - 08/08/2012 - Hummel, Jesse  
 PCH Name: BERKSHIRE COMMONS GENESIS HEALTHCARE

**1. REGULATION 55 Pa.Code §2600**

2600.132(c) - A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

**2a. DESCRIPTION OF VIOLATION**

Department Representatives determined that the home is not properly documenting the residents that were evacuated during the home's fire drills. On 5/28/12 the home conducted a fire drill at 12:40am. There were 57 residents at the facility when the alarm was sounded, however the home documented that 0 residents were evacuated during the fire drill. On 6/22/12 at 4:45pm the home conducted a fire drill. There were 63 residents at the home when the alarm was sounded, however the home documented that 0 residents were evacuated during the drill.

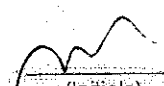
**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)**

*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

Residents were evacuated during the drills that were documented as 0 evacuated. Our record of the drills included numbers documented by the company conducting the drill. The numbers were inaccurate. Education on proper documentation was received at time of exit meeting. The documentation was corrected on 8/6/12. Documentation going forward will include proper number of evacuated residents. ED or designee will monitor for accuracy.

Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page)			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)			Date
LEE DWYAL E.D.			8/27/12

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The above plan of correction is approved as of	10-12-12 (Date)	Plan of correction implementation status as of	10-12-12 (Date)
The above plan of correction was approved by		<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented	
 (Initials)			

Violation Report: 22199 - 08/06/2012 - Hummel, Jesse  
 PCH Name: BERKSHIRE COMMONS GENESIS HEALTHCARE

**1. REGULATION 55 Pa.Code §2600**

2600.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.

**2a. DESCRIPTION OF VIOLATION**


The home does not have a letter from a Fire Safety Expert designating an extended evacuation time of over 2 minutes and 30 seconds. The home regularly evacuates residents during fire drills in over 2 minutes and 30 seconds.

**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)**

*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

A copy of the fire letter was obtained from the fire safety expert company and attached.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) 

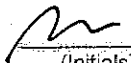
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <b>LEG DWINNA E.D.</b>	Date
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The above plan of correction is approved as of 10/26/12  
 (Date)

Plan of correction implementation status as of 10/26/12  
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
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- Not Implemented

The above plan of correction was approved by   
 (Initials)



## Alarm Tech Systems, Inc.

2670 LEISCZ'S BRIDGE ROAD • SUITE 200 • LEESPORT, PA 19533  
 610-916-1090 • Fax 610-916-0899  
 www.alarmtechsys.com

October 23, 2012

Berkshire Commons  
 6485 Perklomen Ave  
 Reading, PA 19606

Dear Lee Dwinai,

A full evacuation drill of your facility was conducted with our company presence on October 19, 2012 at 9am. All residents were in the safe areas within 8.23 minutes and the full evacuation of the building was all completed within 9.16 minutes. Therefore, due to the construction, layout and structure itself, an evacuation time of 9.16 minutes to evacuate all residents and staff to an area of safety and or completely from your facility is an acceptable time frame.

Your facility is adequately protected against the threat of fire by the following items:

- Fully sprinklered building
- Automatic central station fire alarm system with the following features:
  - Visual Fire Strobes for hearing impaired
  - Fire Alarm System with zones covering the entire building with heat and smoke detectors
  - U.L. Listed 24 hour monitoring service which transmits alarm notification to County 911 center.
- Ansul System in kitchen
- 5/8" fire rated drywall
- Fire rated doors on all resident rooms
- 6" Concrete between floors
- The following "fire safe" areas as defined in code 132-D which can be used to shelter residents during fire drills or actual fire situations.
  - Cinderblock fire towers with self closing doors at each end and the core of the building
  - The fire tower doors are 1.5 hr "B" doors
    - 1<sup>st</sup> floor homestead section (south)
    - 1<sup>st</sup> floor core area (central)
    - 1<sup>st</sup> floor general section (west)
      - On the 1<sup>st</sup> floor, residents can initially be moved either to the stairwells or beyond the smoke/fire doors as an area of safety until help arrives to assist in complete removal out of the building.
    - 2<sup>nd</sup> floor homestead section (south) stairwell
    - 2<sup>nd</sup> floor general section (west) stairwell
      - The second floor stairwells are large enough to safely shelter residents until FD assistance is rendered to assist in moving non-ambulatory residents completely out of the building.
- Automatic Elevator Shut down

9.16

10/26/12

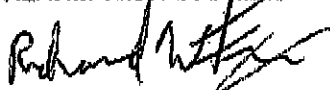
- **Additional non-building features:**
  - 2 fire hydrants within 100' of the building
  - First due fire department has indicated that from time of alarm their response time is less than 10 minutes to you facility.
  - Monthly fire drills are conducted, recorded and supervised by an outside agency.
    - During normal fire drills, residents are moved to "Fire Safe Areas" within the facility or to designated areas outside the facility.
    - A drill was conducted during my presence with satisfactory results in "Fully Evacuating" all residents out of the building.


#### ADDITIONAL RECOMMENDATIONS

- During an actual fire incident, all residents should, as soon as humanly possible, be removed from the building, even those initially put in "safe areas".
- An updated sheet of patients with "special needs" caused by physical or mental disabilities, which would or could prevent quick evacuation of the patient by staff, should be kept in the "knox box" for immediate review by the first arriving fire department officer. This will allow the first arriving fire department officer to quickly assign members to this removal.
- If staff allows during a true fire incident, follow up the automatic alarm of fire with a "second source" telephone alarm of fire to the county 911 center. This sometimes assists the fire and EMS agencies in transmitting greater alarms sooner for personnel to assist in evacuations, if they have a confirmation that this is an actual fire.
- Safe area beyond beauty shop
- Meeting place gazebo
- More people to search rooms
- Taking people out of stairwell to exit out front
- Hand units for employees
- Announcement needs to be right away
- Educate residents on 2<sup>nd</sup> floor apartments to evacuate when alarm sounds some residents did not evacuate until staff arrived and instructed them to leave.
- A yearly supervised fire drill should be conducted in the presence of the local fire department having jurisdiction to educate them with your facility.

Should you have any questions or comments concerning the information contained herein, please feel free to contact me.

Sincerely,  
ALARM TECH SYSTEMS

  
RICHARD W. FIX, SET  
Systems Engineer

10/26/12  


Violation Report: 22199 - 08/06/2012 - Hummel, Jesse  
 PCH Name: BERKSHIRE COMMONS GENESIS HEALTHCARE

1. REGULATION 55 Pa.Code §2600

2600.132(h) - Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

2a. DESCRIPTION OF VIOLATION

On 7/28/12 at 7:10pm the home's fire alarm system was activated due to smoke created from a residents family member broiling a steak in the kitchen located within the home's common activity area. Department Representatives determined through interviews with resident #1 and resident #2, both of which were in the activity room when the alarm sounded, that the staff of the home did not evacuate the residents to the designated fire safe areas within the home as required.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Residents will be evacuated to the fire safe zones for all fire alarms. Proper evacuation instructions were given at a staff meeting on 8/14/12. All staff will be re-inserviced on proper evacuations by 8/31/12.

\* The administrator will monitor monthly fire drill logs and will assure that all residents & staff evacuate to the designated fire safe area(s) during fire drills.

The administrator will assure ongoing compliance. *Lee Dwinac*  
 10/12/12

Repeat Violation: No      Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page) *Lee Dwinac*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)      Date  
 LEE DWINAC      E.D.

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