

Department of Human Services  
Bureau of Human Service Licensing

August 23, 2022

[REDACTED]  
THE HIGHLANDS AT WYOMISSING INC  
2000 CAMBRIDGE AVENUE  
WYOMISSING, PA, 19610

RE: THE HIGHLANDS AT WYOMISSING  
PERSONAL CARE FACILITY  
2000 CAMBRIDGE AVENUE  
WYOMISSING, PA, 19610  
LICENSE/COC#: 20535

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/05/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Anne Graziano

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

**Facility Information**

Name: *THE HIGHLANDS AT WYOMISSING PERSONAL CARE FACILITY* License #: 20535 License Expiration: 11/16/2022

Address: 2000 CAMBRIDGE AVENUE, WYOMISSING, PA 19610

County: BERKS Region: NORTHEAST

**Administrator**

Name: [REDACTED] Phone: 6107752300 Email: [REDACTED]

**Legal Entity**

Name: *THE HIGHLANDS AT WYOMISSING INC*  
Address: 2000 CAMBRIDGE AVENUE, WYOMISSING, PA, 19610  
Phone: 6107752300 Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: I-1 Date: 06/22/2020 Issued By: *Wyomissing Borough*

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 99 Waking Staff: 74

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Incident* Exit Conference Date: 05/13/2022

**Inspection Dates and Department Representative**

01/05/2022 - Off-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: 75 Residents Served: 59

**Secured Dementia Care Unit**

In Home: *Yes* Area: *2nd floor* Capacity: 42 Residents Served: 34

**Hospice**

Current Residents: 4

**Number of Residents Who:**

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 59  
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
Have Mobility Need: 40 Have Physical Disability: 1

## Inspections / Reviews

01/05/2022 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *06/04/2022*

06/27/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *07/05/2022*

08/03/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *08/10/2022*

08/23/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 227d - Support Plan Medical/Dental

## 1. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

## Description of Violation

The assessment for resident #1, dated [REDACTED], indicates the resident has a need for supervision outside the facility. On 12/29/21 resident #1 pressing the emergency release button on the emergency door in the home's secured Dementia Unit, resident #1 eloped from the home.

## Plan of Correction

**Do Not Accept**

Resident was returned to the facility with no injuries. Resident was placed on 1 on 1 supervision for 24 hours and was not showing any further exit seeking behavior. Physician was contacted and a new order was obtained from Dr. Levine for lorazepam 0.5mg give one tab by mouth as needed for anxiety. new order for labs to check potassium level was completed on 01/03/2022 and was within normal limits, no further orders received. Please see attached RASP and lab work.

**Completion Date:** 01/10/2022

**Update:** 06/27/2022

who will be responsible for maintaining ongoing compliance? Is there any other method of managing elopements besides medication depending on the resident?

AG, 6-27-22

## Plan of Correction

**Directed**

Resident was returned to the facility with no injuries. Resident was placed on 1 on 1 supervision for 24 hours and was not showing any further exit seeking behavior. Physician was contacted and a new order was obtained from Dr. Levine for lorazepam 0.5mg give one tab by mouth as needed for anxiety. new order for labs to check potassium level was completed on 01/03/2022 and was within normal limits, no further orders received. Please see attached RASP and lab work.

On 3/21/2022 the emergency release button was upgraded to include an alarm and strobe lights that would indicate that the emergency button was depressed and will not stop alarming and strobing until the emergency button is re-engaged and the doors are once again secure. On 3/25/22 Staff were educated on the push button alarm process and response. Please see attached. This is to alert staff if anyone, including a resident, activates the emergency button and a head count is completed to ensure that all residents are accounted for.

**Directed Plan of Correction:**

The Administrator is responsible for the implementation of this Plan of Correction.

AG, 8-3-22

**Completion Date:** 03/31/2022

**Update:** 08/03/2022

Did the 7:15 am training include both the Overnight staff AND the Day shift for the training on the new elopement protocol?

**227d - Support Plan Medical/Dental (continued)****Document Submission****Implemented**

*Resident was returned to the facility with no injuries. Resident was placed on 1 on 1 supervision for 24 hours and was not showing any further exit seeking behavior. Physician was contacted and a new order was obtained from Dr. Levine for lorazepam 0.5mg give one tab by mouth as needed for anxiety. new order for labs to check potassium level was completed on 01/03/2022 and was within normal limits, no further orders received. Please see attached RASP and lab work.*

*On 3/21/2022 the emergency release button was upgraded to include an alarm and strobe lights that would indicate that the emergency button was depressed and will not stop alarming and strobing until the emergency button is re-engaged and the doors are once again secure. On 3/25/22 Staff were educated on the push button alarm process and response. Please see attached. This is to alert staff if anyone, including a resident, activates the emergency button and a head count is completed to ensure that all residents are accounted for.*

**Directed Plan of Correction:**

*The Administrator is responsible for the implementation of this Plan of Correction.*

*AG, 8-3-22*

*Yes the 7:15 a.m. time for the training included the night shift and day shift staff. Our shifts are 7a.m. to 3:30 p.m 3p.m. to 11:30 p.m. and 11p.m. to 7:30 a.m.*