

Department of Human Services
Bureau of Human Service Licensing

April 26, 2022

[REDACTED]
5485 PERKIOMEN AVENUE OPERATIONS LLC
5485 PERKIOMEN AVENUE
READING, PA, 19606

RE: BERKSHIRE COMMONS, GENESIS
HEALTHCARE
5485 PERKIOMEN AVENUE
READING, PA, 19606
LICENSE/COC#: 22199

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/23/2022 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: *BERKSHIRE COMMONS, GENESIS HEALTHCARE* License #: *22199* License Expiration: *06/14/2022*
Address: *5485 PERKIOMEN AVENUE, READING, PA 19606*
County: *BERKS* Region: *NORTHEAST*

Administrator

Name: [REDACTED] Phone: *6107793993* Email: [REDACTED]

Legal Entity

Name: *5485 PERKIOMEN AVENUE OPERATIONS LLC*
Address: *5485 PERKIOMEN AVENUE, READING, PA, 19606*
Phone: *6107793993* Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *85* Waking Staff: *64*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint, Incident* Exit Conference Date: *02/23/2022*

Inspection Dates and Department Representative

02/23/2022 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *75* Residents Served: *58*

Secured Dementia Care Unit

In Home: *Yes* Area: *Memory Support* Capacity: *28* Residents Served: *24*

Hospice

Current Residents: *3*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *28*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *27* Have Physical Disability: *2*

Inspections / Reviews

02/23/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/01/2022*

Inspections / Reviews (*continued*)

03/24/2022 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *03/31/2022*

04/26/2022 - Document Submission

Reviewer: [REDACTED] Follow-Up Type: *Not Required*

15a - Resident Abuse Report

1. Requirements

2600.

15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

On [REDACTED], Resident #1 pushed Resident #2, who fell to the ground and suffered a fractured right femur. This incident of resident-to-resident abuse was not reported to the Area Agency on Aging as required by this regulation.

Staff Person A alleged that on 1/21/22, Staff Person B told Staff Person A that they lie to Resident #3 about what time of day it was in order to make Resident #3 go to sleep. This allegation of possible resident abuse was not reported to the Area Agency on Aging.

Plan of Correction

Accept

Both staff members involved are no longer working with us. Staff meetings were held to educate staff on the time frame and importance of reporting anything and everything if there is a suspicion of abuse.

Completion Date: 03/23/2022

Update: 03/24/2022

reviewed staff sign in sheets

The Adm will submit a copy of the training materials presented to employees in Step 2 of the process.

AG, 3-24-22

Document Submission

Implemented

Abuse signage

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

On [REDACTED] at 3:00pm, Resident #1 pushed Resident #2, who fell to the ground and suffered a fractured right femur. This incident was not reported to the Department until 2/7/22 at 8:15am.

Staff Person A alleged that on 1/21/22 at 3:25pm, Staff Person B told Staff Person A that they lie to Resident #3 about what time of day it was in order to make Resident #3 go to sleep. This incident was not reported to the Department until 1/24/22 at 4:50pm.

Plan of Correction

Accept

Both staff members involved are no longer working with us. Staff meetings were held to educate staff on the time frame and importance of reporting anything and everything if there is a suspicion of abuse.

Completion Date: 03/23/2022

Update: 03/24/2022

reviewed sign in sheet

The Adm will submit a copy of the training materials presented to employees in Step 2 of the process.

AG, 3-24-22

16c - Written Incident Report (continued)

Document Submission

Implemented

Training Materials

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [redacted] at 3:00pm, Resident #1 became frustrated with and pushed Resident #2, who fell to the ground and suffered a fractured right femur.

Plan of Correction

Accept

The staff member was suspended until further investigation. Then called in and quit. [redacted] no longer works with us. Along with an in-service and policy review on resident rights and abuse reporting.

Completion Date: 03/23/2022

Update: 03/24/2022

The Adm will submit a copy of the training materials presented to staff at the in-services for Step 2. AG, 3-24-22

Document Submission

Implemented

Training Material

42c - Treatment of Residents

1. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

On 1/21/22 at 3:25pm, Staff Person A was told by Staff Person B that they lied to Resident #3 about what time of day it was in order to make Resident #3 go to sleep because Resident #3 liked to go to sleep late.

Plan of Correction

Accept

Staff member is no longer employed with the company and policy and resident rights were reviewed with staff

Completion Date: 03/23/2022

Update: 03/24/2022

The Adm will submit a copy of the training materials presented to employees in Step 2 of the process. AG, 3-24-22

Document Submission

Implemented

Training Material