

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

January 8, 2023

[REDACTED]  
HERITAGE CAMPUS GREEN HILLS OPCO LLC  
400 TRANQUILITY LANE  
READING, PA, 19067

RE: THE HERITAGE OF GREEN HILLS  
CARE CENTER  
400 TRANQUILITY LANE  
READING, PA, 19067  
LICENSE/COC#: 23113

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/08/2022, 11/09/2022 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]  
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: *THE HERITAGE OF GREEN HILLS CARE CENTER* License #: *23113* License Expiration: *08/18/2023*  
 Address: *400 TRANQUILITY LANE, READING, PA 19067*  
 County: *BERKS* Region: *NORTHEAST*

**Administrator**

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

**Legal Entity**

Name: *HERITAGE CAMPUS GREEN HILLS OPCO LLC*  
 Address: *400 TRANQUILITY LANE, READING, PA, 19067*  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *I-1* Date: *06/06/2022* Issued By: *Cumru Twp*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *55* Waking Staff: *41*

**Inspection Information**

Type: *Full* Notice: *Unannounced* BHA Docket #:  
 Reason: *Interim* Exit Conference Date: *11/09/2022*

**Inspection Dates and Department Representative**

11/08/2022 - On-Site: [REDACTED]  
 11/09/2022 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *90* Residents Served: *42*

**Secured Dementia Care Unit**  
 In Home: *Yes* Area: *Secured Unit* Capacity: *20* Residents Served: *0*

**Hospice**  
 Current Residents: *3*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *1* Are 60 Years of Age or Older: *42*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *13* Have Physical Disability: *1*

**Inspections / Reviews**

11/08/2022 - Full  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/12/2022*

12/08/2022 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: *01/06/2023*  
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *12/12/2022*

Inspections / Reviews *(continued)*

01/08/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/06/2023

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

**85d - Trash Receptacles****1. Requirements**

2600.

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**

*The home's main kitchen and main dining room did not have trash containers with lids. The home's kitchen staff stated they were not aware that lids were required when they ordered their trash containers for the area.*

**Plan of Correction****Accept (MM - 12/08/2022)**

*Trash container lids have been purchased and installed on all kitchen trash cans. Administrator will monitor for continued compliance with this regulation.*

**Licensee's Proposed Overall Completion Date: 12/05/2022**

**Implemented (MM - 01/08/2023)****103e - Left Overs****2. Requirements**

2600.

103.e. Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

**Description of Violation**

*One bag of approximately 15 hardboiled eggs was found in the main walk-in refrigerator located in the main kitchen that were not dated when opened.*

**Plan of Correction****Accept (MM - 12/08/2022)**

*Eggs were immediately discarded. Kitchen staff will be rein-serviced on the requirement to date and label all open food items/leftovers. Executive Sous Chef will monitor daily for continued compliance with this regulation.*

**Licensee's Proposed Overall Completion Date: 12/05/2022**

**Implemented (MM - 01/08/2023)****103f - Refrigerator/Freezer Temps****3. Requirements**

2600.

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**

*The apartment size refrigerator located in the medication room, where resident's medications are stored, had a thermometer reading of 50 °F.*

**Plan of Correction****Accept (MM - 12/08/2022)**

*Refrigerator was brand new and setting was turned down to assure the interior temperature was maintained between 32 degrees and 42 degrees. Maintenance team will monitor to assure continued compliance with this regulation.*

**Licensee's Proposed Overall Completion Date: 12/05/2022**

103f - Refrigerator/Freezer Temps (*continued*)*Implemented (MM - 01/08/2023)*

## 231b - Medical Evaluation

**4. Requirements**

2600.

231.b. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner, documented on a form provided by the Department, within 60 days prior to admission. Documentation shall include the resident's diagnosis of Alzheimer's disease or other dementia and the need for the resident to be served in a secured dementia care unit.

**Description of Violation**

*Resident #1's DME dated [REDACTED] for their admission into the home's secured dementia unit, the need for the resident to be served in a secured dementia care unit was not indicated on the DME by the resident's physician.*

**Plan of Correction***Accept (MM - 12/08/2022)*

*Resident #1 DME was corrected by the attending physician. Director of Wellness will review all new admission paper work to assure continued compliance with this regulation.*

**Licensee's Proposed Overall Completion Date:** 12/05/2022

*Implemented (MM - 01/08/2023)*

## 231e - No Objection Statement

**5. Requirements**

2600.

231.e. Each resident record must have documentation that the resident and the resident's designated person have not objected to the resident's admission or transfer to the secured dementia care unit.

**Description of Violation**

*Resident #2 was admitted into the home's secured dementia care unit on [REDACTED] and resident #2's record didn't have documentation that the resident and the resident's designated person have not objected to the resident's admission or transfer to the secured dementia care unit as required.*

**Plan of Correction***Accept (MM - 12/08/2022)*

*Documentation was obtained, and added to the chart, from Resident #2 designated person that they do not object to the resident's transfer to the SDU. Director of Wellness will review all new admission paper work to assure continued compliance with this regulation.*

**Licensee's Proposed Overall Completion Date:** 12/05/2022

*Implemented (MM - 01/08/2023)*