

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

March 1, 2024

[REDACTED]  
HSL DOUGLASSVILLE SUBTENANT LLC

[REDACTED]  
C/O HERITAGE SENIOR LIVING  
[REDACTED]

RE: KEYSTONE VILLA AT  
DOUGLASSVILLE PERSONAL CARE  
1152 BEN FRANKLIN HIGHWAY  
EAST  
DOUGLASSVILLE, PA, 19518  
LICENSE/COC#: 22768

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/18/2024 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: KEYSTONE VILLA AT DOUGLASSVILLE PERSONAL CARE License #: 22768 License Expiration: 06/13/2024
Address: 1152 BEN FRANKLIN HIGHWAY EAST, DOUGLASSVILLE, PA 19518
County: BERKS Region: NORTHEAST

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: HSL DOUGLASSVILLE SUBTENANT LLC
Address: [Redacted]
Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Type: C-2 LP Date: 04/12/1989 Issued By: DLI

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 128 Waking Staff: 96

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Incident Exit Conference Date: 01/18/2024

Inspection Dates and Department Representative

01/18/2024 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 168 Residents Served: 112

Secured Dementia Care Unit

In Home: Yes Area: memory care Capacity: 56 Residents Served: 45

Hospice

Current Residents: 18

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 111
Diagnosed with Mental Illness: 2 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 16 Have Physical Disability: 15

Inspections / Reviews

01/18/2024 - Partial

Lead Inspector: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 02/18/2024

Inspections / Reviews *(continued)*

02/26/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/29/2024

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 02/29/2024

03/01/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/29/2024

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

Resident [REDACTED] Resident Assessment and Support Plan has not been updated to show Resident [REDACTED] [REDACTED] will no longer be self-administered. This medication will be stored and administered by trained staff.

Plan of Correction

Accept [REDACTED] 02/26/2024)

Immediate Corrective Action: Resident [REDACTED] Resident Assessment and Support plan were updated to show Resident [REDACTED] [REDACTED] will no longer be self-administered, at the time of the on-site visit by Human Services Licensing, by Resident Care Director or [REDACTED]

Additional Corrective Actions: The Resident Care Director and Asst. Resident Care Director have been educated on the requirements under this regulation to ensure documentation of such a change is updated on the support plan for any resident affected. This training was completed by the Executive Director on [REDACTED]. Changes to care needs will be reviewed at Clinical Care Meetings weekly, and the Resident Care Director will be responsible for ensuring RASPs are updated as discussed at those meetings, beginning [REDACTED].

Ongoing Quality Assurance Actions: A sample of resident records will be reviewed each quarter by the Executive Director as part of the QA process. This will include ensuring RASPs are updated as needed. Findings, patterns, and trends will be reviewed by the Management Team at Quarterly QA Meetings, beginning with the review of Q1 2024, to be held in April 2024.

Licensee's Proposed Overall Completion Date: 02/16/2024

Implemented [REDACTED] - 03/01/2024)