

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

May 16, 2024

[REDACTED]
GAHC3 BOYERTOWN PA ALF TRS SUB LLC

[REDACTED]
HERITAGE SENIOR LIVING
[REDACTED]

RE: CHESTNUT KNOLL
120 WEST FIFTH STREET
BOYERTOWN, PA, 19512
LICENSE/COC#: 22613

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/16/2024 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: CHESTNUT KNOLL License #: 22613 License Expiration: 06/30/2024
 Address: 120 WEST FIFTH STREET, BOYERTOWN, PA 19512
 County: BERKS Region: NORTHEAST

Administrator

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

Legal Entity

Name: GAHC3 BOYERTOWN PA ALF TRS SUB LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 08/21/2000 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 160 Waking Staff: 120

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Incident Exit Conference Date: 04/16/2024

Inspection Dates and Department Representative

04/16/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 119 Residents Served: 106
 Secured Dementia Care Unit
 In Home: Yes Area: na Capacity: 52 Residents Served: 49
 Hospice
 Current Residents: 16
 Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 111
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 54 Have Physical Disability: 0

Inspections / Reviews

04/16/2024 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 05/03/2024

Inspections / Reviews (*continued*)

05/01/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/10/2024

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 05/06/2024

05/16/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/10/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

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 3/30/24 at approximately 6:30pm resident [REDACTED] became agitated when staff member A attempted to redirect resident away from another resident. Resident [REDACTED] became physical with staff member A, punching staff member A in the stomach. Staff member A responded by striking resident on the right arm. Event was witnessed by staff member B. Resident was found to have a red mark on arm in the general area where the hit was thought to have occurred. Staff member walked away after the incident.

Plan of Correction**Accept [REDACTED] - 05/01/2024)**

Immediate Actions taken: Staff contacted the Resident Care Director who reported to the community and immediately suspended staff member A and sent them home. Resident Care Director (RCD) interviewed the resident who had no recollection of the incident, [REDACTED] then assessed resident for any signs of injuries, and none were found at that time. RCD then began collecting statements from all staff involved and an investigation was initiated. Resident was monitored for any further behaviors and had no further behaviors that evening or next day.

Additional Actions taken: The next day, RCD again assessed resident and found a small red mark on [REDACTED] arm in the area where the staff member B reported that staff member A had struck. Police were notified of the incident after it was determined that staff member A likely did strike resident. Staff member A was terminated from employment. All staff will be educated on Abuse and reporting responsibilities by Executive Director by 5/10/2024. Resident has been monitored for further behaviors, one on one home care was initiated for resident for approx. 2 weeks and behaviors continued therefore they are currently being treated at a hospital for Behavior management.

Ongoing Quality Assurance Actions: Support plan has been updated and community will continue to monitor for any further behaviors upon [REDACTED] return and address behaviors in the support plan. The Memory Care Director will review incidents and success of support plan updates as part of the Quarterly QA Meetings, beginning July 2024.

Licensee's Proposed Overall Completion Date: 05/10/2024

Implemented [REDACTED] - 05/16/2024)