

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

November 4, 2024

[REDACTED]
BERKS LEISURE LIVING INC
[REDACTED]

RE: BERKS LEISURE LIVING
1399 FAIRVIEW DRIVE
LEESPORT, PA, 19533
LICENSE/COC#: 20569

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/02/2024 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: *BERKS LEISURE LIVING* License #: *20569* License Expiration: *03/23/2025*
 Address: *1399 FAIRVIEW DRIVE, LEESPORT, PA 19533*
 County: *BERKS* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *BERKS LEISURE LIVING INC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C 2 LP* Date: *01/04/2000* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *40* Waking Staff: *30*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #: [REDACTED]
 Reason: *Complaint* Exit Conference Date: *10/02/2024*

Inspection Dates and Department Representative

10/02/2024 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *49* Residents Served: *39*

Secured Dementia Care Unit
 In Home: *No* Area: [REDACTED] Capacity: [REDACTED] Residents Served: [REDACTED]

Hospice
 Current Residents: *4*

Number of Residents Who:
 Receive Supplemental Security Income: *12* Are 60 Years of Age or Older: *38*
 Diagnosed with Mental Illness: *2* Diagnosed with Intellectual Disability: *2*
 Have Mobility Need: *1* Have Physical Disability: *0*

Inspections / Reviews

10/02/2024 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/21/2024*

10/25/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *10/30/2024*
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *10/30/2024*

Inspections / Reviews *(continued)*

11/04/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/30/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

103e - Left Overs

1. 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

On [redacted] the home's kitchen was inspected and the following items were found stored in the freezers and refrigerator with no labels indicating the contents and the dates the foods were stored:

A bag of what appeared to be frozen hot dogs, a type of meat wrapped tightly in Saran wrap, and a bag of breakfast type sausage links.

Plan of Correction

Accept [redacted] - 10/25/2024)

Regulation 103.e is important because it ensures that leftover food shall be labeled and dated with contents and opened date so as to promote the integrity of the food being served.

This regulation was violated due to the fact that the food was not properly labeled which would have identified the contents nor was the date available as to when packages were opened and stored.

Staff have been given verbal reminders to label and date all opened packages. Follow up training on reg 2600.103.e occurred 10/2, 10/3, 10/4.

Related flow sheet has been implemented and will be overseen by Dietary Supervisor [redacted] and General Manager [redacted]

Licensee's Proposed Overall Completion Date: 10/31/2024

Implemented [redacted] - 11/04/2024)

103g - Storing Food

2. Requirements

2600.

103.g. Food shall be stored in closed or sealed containers.

Description of Violation

On [redacted] a plastic bag of frozen chicken nuggets was found in the freezer in a bag that was twisted but not secured with a tie and also with a hole on the side of the bag. There was also a gallon size tub of hard boiled eggs stored in the pantry refrigerator that was not sealed properly because the lid did not fully close.

Plan of Correction

Accept [redacted] - 10/25/2024)

Reg 103.g is important as keeping food stored in closed or sealed containers prevents exposure to the air and/or airborne contaminants which alter the integrity of the food inside the container/package.

This violation occurred due to improper storage of food not securely sealed. Bag was twisted but not completely sealed with a tie, storage bag had a hole and egg container lid was not securely in place.

Staff have received verbal reminders 10/2,10/3,10/4 of proper storage related to reg 103.g and will be following guidelines on a monthly flow sheet targeting food storage.

Dietary Supervisor [redacted] and Gen Manager [redacted] will oversee staff compliance.

Licensee's Proposed Overall Completion Date: 10/31/2024

Implemented [redacted] - 11/04/2024)

103h - Thawing Food

3. Requirements

2600.

103.h. Food shall be thawed either in the refrigerator, microwave, under cool water or as part of the cooking process.

Description of Violation

On [redacted] during an inspection of the home's kitchen a large box of meat stuffed peppers was found on a counter in the pantry. Staff stated the peppers were being thawed for the following day's meal.

Plan of Correction

Accept [redacted] - 10/25/2024)

Reg 103.h is very important to the proper handling and cooking of frozen food. It should be thawed according to guidelines of thawing it in the refrigerator, microwave, under cool water or as part of the cooking process.

A violation of this reg occurred because guidelines were not followed and a box of frozen stuffed peppers were placed on a counter in the pantry at room temperature to thaw.

Staff have received verbal reminders on 10/2, 10/3, 10/4 related to the proper techniques of thawing frozen foods. Dietary Supervisor [redacted] and Gen Manager [redacted] have developed and will oversee the implemented monthly low sheet that will address regs 103.e; 103.g and 103.h

Licensee's Proposed Overall Completion Date: 10/31/2024

Implemented [redacted] - 11/04/2024)

184a - Resident's Meds Labeled

4. Requirements

2600.

184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

4. The prescribed dosage and instructions for administration.

Description of Violation

Resident [redacted] has an order for [redacted] to be administered at meals in the following manner: [redacted] at breakfast, [redacted] at lunch, and [redacted] at dinner. The order for the insulin also includes the instructions to administer one half dose for blood sugars 100 or below. The label for the resident's [redacted] pen does not include this parameter and does not include the instructions to also administer the insulin on a sliding scale as well at meals.

Plan of Correction

Accept [redacted] - 10/25/2024)

Reg 184.a is very important as part of the medication administration process as it provides instructions on medication being stored in the original container, labeled with a pharmacy label that includes the prescribed dosage and instructions for administration.

Novolog insulin did not have a pharmacy label secured to it with instructions that included parameters related to specific blood sugar results, therefore a medication error could result without complete instructions on the pharmacy label.

Related staff received additional verbal training 10/2, 10/3, 10/4 related to proper labeling of all medications and instructions to make on site LPN [redacted] and/or Administrator [redacted] aware of medications without labels or incomplete labels.

Ongoing oversight of medications will be done by on site LPN [redacted] and Administrator [redacted] Pharmacy of origin will be made aware of corrections as needed. Training materials available for staff review placed within easy access in med room. Label with all instructions for dosage and administration applied to insulin pen. Audits during weekly medication deliveries will occur by LPN [redacted]

184a - Resident's Meds Labeled (continued)

Licensee's Proposed Overall Completion Date: 10/31/2024

Implemented () - 11/04/2024)

187b - Date/Time of Medication Admin.

5. Requirements

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

On an audit of the home's Medication administration records found that the following resident's medications were not initialed when they were administered on the dates and times listed below:

Resident , at bedtime were not initialed on 9/1/24, 9/2/24, 9/27/24, 9/28/24, and 9/29/24.

Resident was not initialed on 9/14/24 at 4pm and 8pm. Also, Resident was not initialed on 9/13/24 at 12pm and 9/27/24 at 12pm.

Resident was not initialed on 9/24/24 at 8am.

Resident tablet was not initialed on 9/14/24 and 9/15/24 at 4pm. Also Resident s , and were not initialed on 9/15/24 at 8pm.

Resident tablet was not initialed on 9/10/24 and 9/15/24 at 8pm.

Resident tablet was not initialed on 9/22/24 at 8pm.

Resident tablet and tablet were not initialed on 9/28/24 at 8pm. Also Resident tablet was not initialed on 9/24/24, 9/28/24, and 9/29/24 at 8pm and their tablet was not initialed on 9/28/24 at 8pm.

Plan of Correction

Accept () - 10/25/2024)

Information in Reg 187.b as it relates to reg 187.a(13) & (14) that the date and time of medication administered and the name and initials of the staff person administering the medication is important as it can prevent medication errors of omission, wrong date/time and/or wrong dosage due to duplicate administration.

Violation of this reg occurred because staff failed to document on the medication record their initials for medication administered by them as per PCP orders written on the correlating MARs for individuals receiving medications. Staff received verbal review of this regulation and additional reg 187a; 187c and 187d. Related informational material is available for review for staff administering medications.

Ongoing audits will be completed by LPN and Administrator

Licensee's Proposed Overall Completion Date: 10/31/2024

Implemented () - 11/04/2024)

187d - Follow Prescriber's Orders

6. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident has an order for , at breakfast, at lunch, and 8 units at dinner. If the resident's blood sugar reading is 100 or below the s to be administered as follows: at breakfast, at lunch, and at dinner. In addition the resident has a sliding scale for additional insulin units at meals. On

187d - Follow Prescriber's Orders (continued)

10/2/24 the following medication errors were found on the resident's MAR:

On 9/1/24 the blood sugar reading at breakfast was [redacted] requiring [redacted] of [redacted] but no sliding scale units were administered.

On 9/1/24 the resident's blood sugar reading was not taken at dinner time.

[redacted] the blood sugar reading at breakfast was [redacted] requiring [redacted] of [redacted] but no sliding scale units were administered.

On [redacted] the blood sugar reading at breakfast was [redacted] and staff administered [redacted] straight units of [redacted] instead of [redacted] units as required.

On [redacted] the blood sugar reading at breakfast was [redacted] and staff initialed the MAR to indicate both the order for [redacted] units of straight [redacted] and [redacted] of straight [redacted] were administered so it could not be determined whether the correct number of insulin units were administered.

On [redacted] the blood sugar reading at breakfast was [redacted] and staff initialed the MAR to indicate both the order for [redacted] units of straight [redacted] and [redacted] of straight [redacted] were administered so it could not be determined whether the correct number of [redacted] units were administered.

Plan of Correction

Accept [redacted] - 10/25/2024)

Reg 187d indicates that directions of the prescriber must be followed and is important that this occurs as it ensures proper/ complete medication compliance and administration.

iolation of this reg may have occurred because staff did not properly/completely document on the medication records that prescriber directions were followed.

Related prescriber orders and documentation were reviewed and clarified with staff 10/2, 10/3, 10/4. Staff were encouraged and instructed to follow up with LPN [redacted] and/or Administrator/LPN [redacted] if they are not clear on prescriber orders.

MAR audits will be implemented by LPN [redacted]; results will be reviewed by Administrator [redacted]

Licensee's Proposed Overall Completion Date: 10/31/2024

Implemented [redacted] 11/04/2024)