

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

March 5, 2025

[REDACTED]
PHOEBE BERKS HEALTH CARE CENTER, INC.
[REDACTED]

RE: PHOEBE BERKS VILLAGE
1 READING DRIVE
WERNERSVILLE, PA, 19565
LICENSE/COC#: 20536

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/15/2025 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: PHOEBE BERKS VILLAGE License #: 20536 License Expiration: 07/30/2025
 Address: 1 READING DRIVE, WERNERSVILLE, PA 19565
 County: BERKS Region: NORTHEAST

Administrator

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

Legal Entity

Name: PHOEBE BERKS HEALTH CARE CENTER, INC.
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 08/04/1994 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 117 Waking Staff: 88

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Incident, Interim Exit Conference Date: 01/15/2025

Inspection Dates and Department Representative

01/15/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 103 Residents Served: 86
 Secured Dementia Care Unit
 In Home: Yes Area: Village Gardens Capacity: 37 Residents Served: 31
 Hospice
 Current Residents: 1
 Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 86
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 31 Have Physical Disability: 0

Inspections / Reviews

01/15/2025 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/01/2025

03/04/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 03/04/2025
 Reviewer: [REDACTED] Follow-Up Type: Bypass Document Submission

Inspections / Reviews *(continued)*

03/05/2025 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/04/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

185a - Implement Storage Procedures

1. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident [redacted] requires blood glucose readings twice daily with insulin administered on a sliding scale basis. On the 7am blood glucose reading was [redacted] but the reading was recorded as [redacted] on the resident's Medication Administration record (MAR).

Plan of Correction

Accept [redacted] 03/04/2025)

On January 24, 2025 staff was educated by the Administrator or Designee on a new policy that all glucometer and insulin amounts are to be verified and charted by a second staff memeber that is a licensed nurse or a med tech trained by a Certified Diabetic Trainer. Administrator or Designee will monitor for ongoing compliance. All new med techs that a trained by a Certified Diabetic trainer will be educated on the policy and sign off on the training. (see attached)

Licensee's Proposed Overall Completion Date: 02/02/2025

Implemented [redacted] - 03/04/2025)

187d - Follow Prescriber's Orders

2. Requirements

2600.

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

Description of Violation

Resident [redacted] has an order for [redacted] monitoring twice daily with [redacted] administered on a sliding scale basis. On [redacted] the blood glucose reading was inaccurately recorded on the MAR as [redacted] resulting in the resident receiving [redacted] units of [redacted] at 7am. Resident [redacted] sliding scale order indicates that a blood glucose reading of [redacted] requires [redacted] units of [redacted]

Plan of Correction

Accept [redacted] - 03/04/2025)

On January 24, 2025 staff was educated by the Administrator or Designee on a new policy that all glucometer and insulin amounts are to be verified and charted by a second staff memeber that is a licensed nurse or a med tech trained by a Certified Diabetic Educator. Administrator or Designee will monitor for ongoing compliance. All new med techs that a trained by a Certified Diabetic trainer will be educated on the policy and sign off on the training. (see attached). Weekly glucometer audits continue.

Licensee's Proposed Overall Completion Date: 02/02/2025

Implemented [redacted] - 03/04/2025)