

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

May 12, 2025

[REDACTED]
HSL BLANDON SUBTENANT LLC

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

RE: KEYSTONE VILLA AT FLEETWOOD
501 HOCH ROAD
BLANDON, PA, 19510
LICENSE/COC#: 22770

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/27/2025 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: *KEYSTONE VILLA AT FLEETWOOD* License #: *22770* License Expiration: *06/04/2025*
 Address: *501 HOCH ROAD, BLANDON, PA 19510*
 County: *BERKS* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *HSL BLANDON SUBTENANT LLC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *05/18/2011* Issued By: *Maiden creek Township*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *73* Waking Staff: *55*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *03/27/2025*

Inspection Dates and Department Representative

03/27/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *65* Residents Served: *62*
 Secured Dementia Care Unit
 In Home: *No* Area: Capacity: Residents Served:
 Hospice
 Current Residents: *13*
 Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *62*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *11* Have Physical Disability: *0*

Inspections / Reviews

03/27/2025 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/26/2025*

04/28/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *05/09/2025*
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *05/05/2025*

Inspections / Reviews *(continued)*

05/12/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/09/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

42c - Treatment of Residents

1. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

On [REDACTED], Staff A got into a verbal argument with Resident [REDACTED] while administering medications and had to be removed from the situation by another Staff member.

Plan of Correction

Accept [REDACTED] - 04/28/2025)

Immediate Corrective Actions: At the time of the incident on 3/7/25, the med tech and resident were immediately separated. Resident [REDACTED] was redirected to [REDACTED] apartment and provided with support. Staff A was suspended immediately for 3 days.

Additional Corrective Action: Prior to Staff A's return to the community, [REDACTED] completed additional trainings on effective communication and de-escalation techniques. This was completed on Relias Learning on 3/20/25. When Staff A returned to work, [REDACTED] was under direct supervision for two weeks to ensure appropriate engagement and communication with the residents. Resident rights were reviewed with Staff A by the Executive Director on 3/21/25.

Ongoing Quality Assurance: Resident Care Director will meet with Staff A for weekly check-ins. We will continue with our annual resident rights training and will review ongoing compliance at our quarterly QA meetings.

Licensee's Proposed Overall Completion Date: 04/16/2026

Implemented [REDACTED] - 05/12/2025)

103f - Refrigerator/Freezer Temps

2. 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

At 9:30 a.m., there was no thermometer located in the refrigerator of the kitchenette on Floor 3

Plan of Correction

Accept [REDACTED] - 04/28/2025)

Immediate Corrective Actions: On 3/27/27, at time of inspection, our Resident Life Director purchased a thermometer and placed it in the refrigerator.

Additional Corrective Action: All housekeeping staff will be trained on 4/18/25 on protocols for thermometers, to ensure thermometers are located in all common area refrigerators.

Ongoing Quality Assurance Actions: The Maintenance Director will check common area refrigerators weekly, beginning 4/21/25, to ensure there is a working thermometer in place. This will be reviewed as part of the quarterly QA meetings, beginning July 2025.

Licensee's Proposed Overall Completion Date: 04/16/2026

Implemented [REDACTED] - 05/12/2025)

105g - Lint Removal and Duct Cleaning**3. Requirements**

2600.

105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

Description of Violation

At 9:17 a.m., the empty dryer in Resident laundry on Floor 2 had a full lint trap.

At 9:25am, the empty dryer in Resident laundry on Floor 3 had a full lint trap.

Plan of Correction

Accept (█ - 04/28/2025)

Immediate Corrective Actions: On 3/27/25, at time of inspection, the Executive Director removed the lint from each dryer.

Additional Corrective Action: All housekeeping staff will be trained on 4/18/25 on protocols for lint removal, to ensure lint is removed from the dryer immediately after use.

Ongoing Quality Assurance Actions: The Maintenance Director will check dryers for lint weekly, beginning 4/21/25. This will be reviewed as part of the quarterly QA meetings, beginning July 2025.

Licensee's Proposed Overall Completion Date: 04/16/2026

Implemented (█ - 05/12/2025)