

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

June 9, 2025

[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 05/13/2025 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 DOUGLASSVILLE PERSONAL CARE License #: 22768 License Expiration: 06/13/2026
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: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 196 Waking Staff: 147

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint Exit Conference Date: 05/13/2025

Inspection Dates and Department Representative

05/13/2025 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

Table with 2 columns: Category and Value. Rows include General Information (License Capacity: 168, Residents Served: 131), Secured Dementia Care Unit (In Home: Yes, Area: Daybreak, Capacity: 54, Residents Served: 52), Hospice (Current Residents: 18), and Number of Residents Who (Receive Supplemental Security Income: 0, Are 60 Years of Age or Older: 130, Diagnosed with Mental Illness: 0, Diagnosed with Intellectual Disability: 0, Have Mobility Need: 65, Have Physical Disability: 2).

Inspections / Reviews

Table with 2 columns: Date/Type and Details. Rows include 05/13/2025 Partial (Lead Inspector: [Redacted], Follow-Up Type: POC Submission, Follow-Up Date: 06/13/2025) and 06/09/2025 - POC Submission (Submitted By: [Redacted], Date Submitted: 06/09/2025, Reviewer: [Redacted], Follow-Up Type: Bypass Document Submission).

Inspections / Reviews *(continued)*

06/09/2025 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/09/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

231c - Preadmission Screening

1. Requirements

2600.

231.c. A written cognitive preadmission screening completed in collaboration with a physician or a geriatric assessment team and documented on the Department’s preadmission screening form shall be completed for each resident within 72 hours prior to admission to a secured dementia care unit.

Description of Violation

Resident [redacted] was admitted to the Secure Dementia Care Unit (SDCU) on [redacted]. However, the resident [redacted] written cognitive preadmission screening was completed on [redacted].

Plan of Correction

Accept ([redacted] - 06/09/2025)

Immediate Corrective Action - While we are unable to immediately address the timeframe of the date on the pre-screen the Memory Care Director responsible for the original pre-screen is no longer employed with the community. A new Memory Care Director assumed the role on February 17, 2025, and received training upon hire regarding the regulatory requirement that the pre-screen for a secured dementia neighborhood must be completed within 72 hours of admission. The pre-screens for all move-ins to the secured dementia neighborhood since the new Memory Care Director started have been audited by the Executive Director utilizing the community's 30 day audit tool. The pre-screens are all in compliance of the regulation.

Additional Corrective Action - The Memory Care Director, Resident Care Director, and Assistant Resident Care Director were re-trained by the Executive Director on 6/4/25 regarding the regulatory requirement that the pre-screen for a secured dementia neighborhood must be completed within 72 hours of admission.

Ongoing Quality Assurance - The Executive Director will audit new admissions each month to ensure ongoing compliance. Any findings will be reported at the next quarterly quality assurance meeting to be held in July 2025.

Licensee's Proposed Overall Completion Date: 07/17/2025

Implemented [redacted] 06/09/2025)