

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

August 4, 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 06/26/2025, 07/07/2025 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: 198 Waking Staff: 149

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Incident Exit Conference Date: 07/07/2025

Inspection Dates and Department Representative

06/26/2025 - On-Site: [Redacted]
07/07/2025 - Off-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

Table with 4 columns: Category, Value 1, Value 2, Value 3. Rows include General Information (License Capacity: 168, Residents Served: 135), Secured Dementia Care Unit (In Home: Yes, Area: Memory Care, Capacity: 68, Residents Served: 51), Hospice (Current Residents: 19), and Number of Residents Who (Receive Supplemental Security Income: 0, Are 60 Years of Age or Older: 134, Diagnosed with Mental Illness: 0, Diagnosed with Intellectual Disability: 0, Have Mobility Need: 63, Have Physical Disability: 1).

Inspections / Reviews

Table with 3 columns: Date/Type, Lead Inspector, Follow-Up Type, Follow-Up Date. Rows include 06/26/2025 Partial (Lead Inspector: [Redacted], Follow-Up Type: POC Submission, Follow-Up Date: 07/28/2025) and 07/25/2025 - POC Submission (Submitted By: [Redacted], Date Submitted: 07/31/2025, Reviewer: [Redacted], Follow-Up Type: Document Submission, Follow-Up Date: 08/01/2025).

Inspections / Reviews *(continued)*

08/04/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/31/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

182b - Prescription Medication

1. Requirements

2600.

182.b. Prescription medication that is not self-administered by a resident shall be administered by one of the following:

1. A physician, licensed dentist, licensed physician’s assistant, registered nurse, certified registered nurse practitioner, licensed practical nurse or licensed paramedic.
2. A graduate of an approved nursing program functioning under the direct supervision of a professional nurse who is present in the home.
3. A student nurse of an approved nursing program functioning under the direct supervision of a member of the nursing school faculty who is present in the home.
4. A staff person who has completed the medication administration training as specified in § 2600.190 (relating to medication administration training) for the administration of oral; topical; eye, nose and ear drop prescription medications; insulin injections and epinephrine injections for insect bites or other allergies.

Description of Violation

On [REDACTED], Staff person A, who has not successfully completed the Department-approved medications administration course, administered eye drops to Resident [REDACTED]

Plan of Correction

Accept [REDACTED] - 07/25/2025)

Immediate Corrective Action:

The caregiver who administered the over-the-counter eye drops was re-educated by the Resident Care Director on 6/26/25 regarding the requirement that only staff who have successfully completed the Department-approved Medication Administration Training Program are permitted to administer medications, including over-the-counter eye drops.

Additional Corrective Action:

The Resident Care Director will provide a training review during the next scheduled staff meeting on 8/14/25, emphasizing that only certified Med Techs who have completed the Department-approved Medication Administration Training Program may administer any form of medication, including eye drops. Attendance will be documented.

Ongoing Quality Assurance:

The Resident Care Director will conduct random audits of medication administration records (MARs) weekly for the next 30 days to ensure compliance with medication administration protocols. The outcomes will be reviewed at the next quarterly quality assurance meeting scheduled on October 2, 2025.

Licensee's Proposed Overall Completion Date: 09/01/2025

Implemented [REDACTED] - 08/04/2025)

183b Meds and Syringes Locked

2. Requirements

2600.

183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

Description of Violation

Resident [REDACTED] resides in a secured dementia care unit and cannot self-administers medications. On [REDACTED], Staff [REDACTED] applied eye drops to the resident's eyes. The eye drops were located in an unlocked cabinet in the resident's room.

Plan of Correction

Accept [REDACTED] - 07/25/2025)

Immediate Corrective Action:

The eye drops were immediately removed on 6/26/25 from the resident's apartment by the Memory Care Director and secured in the locked medication cart to ensure proper storage.

Additional Corrective Action:

On 6/26/25, the Memory Care Director conducted a full walk-through of all memory care apartments to ensure no unsecured over-the-counter medications were present. No other concerns were identified during this audit.

The staff will receive reminders from the Resident Care Director at the next scheduled staff meeting on 8/14/25 about the policy regarding proper storage and handling of all medications, including over-the-counter products. The staff will be instructed to remove the medication and alert a manager.

Ongoing Quality Assurance:

The Memory Care Director will conduct monthly inspections of all memory care apartments for the next two months (July and August 2025) to verify that no over-the-counter medications are left unsecured. Results of these monthly inspections will be documented and reviewed at the next quarterly Quality Assurance meeting scheduled for October 2, 2025.

Licensee's Proposed Overall Completion Date: 09/01/2025

Implemented ([REDACTED] - 08/04/2025)