

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

December 1, 2025

[REDACTED], PRESIDENT
ASPIRE FOR WELL-BEING
2000 CAMBRIDGE AVENUE
WYOMISSING, PA, 19610

RE: ASPIRE FOR WELL-BEING ASSISTED
LIVING
2000 CAMBRIDGE AVENUE
WYOMISSING, PA, 19610
LICENSE/COC#: 23305

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/29/2025 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: *ASPIRE FOR WELL-BEING ASSISTED LIVING* License #: *23305* License Expiration: *07/23/2026*
 Address: *2000 CAMBRIDGE AVENUE, WYOMISSING, PA 19610*
 County: *BERKS* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *ASPIRE FOR WELL-BEING*
 Address: *2000 CAMBRIDGE AVENUE, WYOMISSING, PA, 19610*
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-1* Date: *10/11/2002* Issued By: *Borough of Wyomissing*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *26* Waking Staff: *20*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *10/29/2025*

Inspection Dates and Department Representative

10/29/2025 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *49* Residents Served: *14*

Special Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *1*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *14*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *1*
 Have Mobility Need: *12* Have Physical Disability: *0*

Inspections / Reviews

10/29/2025 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *11/22/2025*

11/18/2025 - POC Submission

Submitted By: [REDACTED] Date Submitted: *11/17/2025*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *11/24/2025*

Inspections / Reviews (*continued*)

12/01/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/26/2025

Reviewer: [REDACTED]

Follow-Up Type: *Bypass Document
Submission*

12/01/2025 - Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/01/2025

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

25b Contract signatures and renewal

1. Requirements

2800.

25b . The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident’s designated person if any, if the resident agrees. The contract must run month-to-month with automatic renewal unless terminated by the resident with 14 days notice or by the residence with 30 days notice in accordance with § 2800.228 (relating to transfer and discharge).

Description of Violation

The resident-home contract, dated [REDACTED], for resident #1 was not signed by the resident and the record contains no documentation stating the resident was given the opportunity to sign.

The resident-home contract, dated [REDACTED] for resident #2 was not signed by the resident and the record contains no documentation stating the resident was given the opportunity to sign.

The resident-home contract, dated [REDACTED], for resident #3 was not signed by the resident and the record contains no documentation stating the resident was given the opportunity to sign.

Plan of Correction

Accept ([REDACTED] - 11/26/2025)

10/30/25: Education completed by DOW with administrative assistant and care navigator on contract signature requirements. (see attached)

11/4/25: Existing contracts updated by DOW to reflect residents’ inability or preference for designated person to sign.

11/4/25: Resident medical record updated by DOW to indicate residents’ inability or preference for designated person to sign.

11/26/25: The Administrator, or designee will be responsible for monitoring compliance going forward.

Licensee's Proposed Overall Completion Date: 11/26/2025

Implemented ([REDACTED] - 12/01/2025)

132c Fire drill records

2. Requirements

2800.

132.c. A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the residence at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

Description of Violation

The fire drill records for the drills conducted on 7/31/25, 8/25/25, 9/25/25 and 10/10/25 do not include the exits that were used to evacuate.

132c Fire drill records (*continued*)**Plan of Correction**

Accept (█ - 11/26/2025)

11/11/25: Fire drill record updated by DOW to reflect exit route used during fire drill. (see attached)

11/11/25: Fire drill record provided by surveyors consistent with 55Pa.Code 2600.132 (c) will be used by the residence to record and track all fire drills and will include exit route used to evacuate.

11/26/25: The Administrator, or designee will be responsible for monitoring compliance going forward.

Licensee's Proposed Overall Completion Date: 11/26/2025

Implemented (█ - 12/01/2025)

185a Storage procedures

3. Requirements

2800.

185.a. The residence 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

On 10/26/25 at 3:00 p.m. and 11:00 p.m., the control drugs sheet was not initialed, according to the residence's policy, to indicate the Lorazepam prescribed for Resident #4 was counted by incoming and outgoing staff.

On 10/29/25 at 3:00 p.m. and 11:00 p.m. the control drugs sheet was not initialed, according to the residence's policy, to indicate the Lorazepam prescribed for Resident #4 was counted by incoming and outgoing staff.

Resident #2 is prescribed Levsin/SL .125 tablet PRN However; the medication was not available in the residence.

Plan of Correction

Accept (█ - 11/26/2025)

10/30/25: Education provided by DOW to staff regarding reordering of expired medications to ensure all provider ordered medications are on site. (see attached)

10/30/25: Education, including review of policy, provided by DOW to staff regarding signatures on shift-to-shift check sheet for narcotics. (see attached)

10/30/25: Ongoing education to continue.

11/26/25: The Administrator, or designee will be responsible for monitoring compliance going forward.

Licensee's Proposed Overall Completion Date: 11/26/2025

Implemented (█ - 12/01/2025)

254a Records – discharge/active

4. Requirements

2800.

254.a. Records of active and discharged residents shall be maintained in a confidential manner, which prevents unauthorized access.

254a Records – discharge/active (continued)**Description of Violation**

On 10/29/25 at 3:10 p.m., the Narcotic Controlled Substance Record Log was noted on top of the medication cart, unlocked, unattended, and accessible to unauthorized persons.

Plan of Correction**Accept (█ - 11/26/2025)**

11/12/25: The Narcotic Controlled Substance Record Log was moved by DOW into the locked medication room with Narcotic box. All medications will be counted in the locked room. No access or visibility to unauthorized persons.

11/26/25: The Administrator, or designee will be responsible for monitoring compliance going forward.

Licensee's Proposed Overall Completion Date: 11/26/2025

Implemented (█ - 12/01/2025)