

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

March 12, 2026

[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 02/10/2026 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: *06/04/2026*
 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: *Maidencreek Township*

Staffing Hours

Resident Support Staff: Total Daily Staff: *68* Waking Staff: *51*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *02/10/2026*

Inspection Dates and Department Representative

02/10/2026 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *65* Residents Served: *61*

Secured Dementia 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: *61*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *7* Have Physical Disability: *0*

Inspections / Reviews

02/10/2026 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/05/2026*

03/04/2026 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *03/11/2026*
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *03/11/2026*

Inspections / Reviews *(continued)*

03/12/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/11/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

17 - Record Confidentiality

1. Requirements

2600.

17. Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

Description of Violation

At 9:20 a.m., the third-floor medication cart was unattended; and the computer sitting on top of the cart had its screen unlocked and opened. When the Licensing Representative clicked on an open screen tab resident [redacted]'s medical records were visible and accessible.

Repeat Violation: [redacted]

Plan of Correction

Accept [redacted] 03/04/2026)

Immediate Corrective Action: At the time of the incident on 2/10/2026, the laptops were immediately locked by the LPN.

Additional Corrective Action: All med tech's will be trained by 3/10/26 by the Resident Care Director on record confidentiality.

Ongoing Quality Assurance Actions: The resident care director or clinical care coordinator will perform random checks, at least weekly, to ensure the med tech laptops are being locked when unattended. This will be reviewed as part of the quarterly QA meetings, beginning April 2026. The Executive Director will ensure compliance by providing weekly oversight.

Licensee's Proposed Overall Completion Date: 03/11/2026

Implemented [redacted] - 03/12/2026)

182c - Medication Administration

2. Requirements

2600.

182.c. Medication administration includes the following activities, based on the needs of the resident:

- 6. Place the medication in the resident's hand, mouth or other route as ordered by the prescriber, in accordance with the limitations specified in subsection (b)(4).

Description of Violation

At 1:05 p.m., resident [redacted] stated that after returning from a facility run grocery trip they found their morning medication sitting in a cup on their dresser. This incident was confirmed by Staff member B when interviewed. The staff member stated that they left the residents' morning medications on the resident's dresser so that the resident would see them when they returned from a grocery trip. According to the residents' [redacted] medical evaluation, the resident cannot self-administer medications.

Plan of Correction

Accept [redacted] - 03/04/2026)

Immediate Corrective Action: When interviewed at time of inspection on 2/10/26, staff member B confirmed the medication was left in the residents room. Staff member B was educated by DHS as well as Executive Director.

182c Medication Administration (continued)

Additional Corrective Action: Staff member B received additional education on 2/11/2025 by the Resident Care Director on proper medication administration.

Ongoing Quality Assurance Actions: Beginning the week of 3/9/26, the resident care director or resident care coordinator will complete a walk thru of 5 apartments weekly to ensure no medications have been left in the apartment. This will be reviewed as part of the quarterly QA meetings, beginning April 2026. The Executive Director will ensure compliance by providing routine weekly oversight.

Licensee's Proposed Overall Completion Date: 03/11/2026

Implemented [REDACTED] 03/12/2026)