

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

September 11, 2026

[REDACTED]
COUNTRY MEADOWS OF WYOMISSING LLC
[REDACTED]

RE: COUNTRY MEADOWS OF
WYOMISSING II
1802 TULPEHOCKEN ROAD
WYOMISSING, PA, 19610
LICENSE/COC#: 20504

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/19/2026 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: COUNTRY MEADOWS OF WYOMISSING II **License #:** 20504 **License Expiration:** 03/26/2027
Address: 1802 TULPEHOCKEN ROAD, WYOMISSING, PA 19610
County: BERKS **Region:** NORTHEAST

Administrator

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

Legal Entity

Name: COUNTRY MEADOWS OF WYOMISSING LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C 2 LP	Date: 03/06/1998	Issued By: L&I
Type: I 1	Date: 12/08/2010	Issued By: Wyomissing Borough
Type: I 2	Date: 12/08/2010	Issued By: Wyomissing Borough

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 151 **Waking Staff:** 113

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 08/19/2026

Inspection Dates and Department Representative

08/19/2026 On Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 166 **Residents Served:** 111

Secured Dementia Care Unit

In Home: Yes **Area:** secured **Capacity:** 60 **Residents Served:** 40

Hospice

Current Residents: 6

Number of Residents Who:

Receive Supplemental Security Income: 0	Are 60 Years of Age or Older: 111
Diagnosed with Mental Illness: 0	Diagnosed with Intellectual Disability: 0
Have Mobility Need: 40	Have Physical Disability: 0

Inspections / Reviews

08/19/2026 - Partial

Lead Inspector: [REDACTED] **Follow Up Type:** POC Submission **Follow Up Date:** 09/11/2026

Inspections / Reviews (*continued*)

09/10/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/10/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 09/17/2026

09/11/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/10/2026

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 person A was heard talking to resident [REDACTED] and resident [REDACTED] in disparaging manner. Resident [REDACTED] requested to make a phone call and staff person A told the resident to go to their room. When resident [REDACTED] continued to ask to use the phone staff person A told the resident they need to stop yapping and to play the quiet game. Resident [REDACTED] did not comply, and staff person A yelled "Quiet game" and then ignored the resident and walked away. Staff person A was also heard threatening to strike resident [REDACTED]. Staff person A said they were going to drag this resident to their room and that staff person A has "something for resident".

Plan of Correction

Accept [REDACTED] - 09/09/2026)

Upon notification on 8/11/2026 of the 8/5/2026 incident from a caller identifying themselves as a Police Officer, Laura Strausser, Executive Director verified the caller's credentials and immediately suspended staff person A to ensure the safety of the residents. The Police Officer was conducting a criminal investigation that did not include the coworker. Evidence included phone call recordings of the coworker while on duty. Laura Strausser initiated all reporting requirements and conducted an internal investigation. Staff person A was found to be in direct violation of Resident Rights and Country Meadows of Wyomissing's Electronic Resource Policy with the use of personal cell phones. Staff person A's behavior is not consistent with Country Meadows workplace expectations and employment was terminated on 8/6/2026.

On 8/11/2026, all coworkers were reeducated on the Electronic Resource Policy, referencing the use of cell phones in the workplace. Each coworker signed the policy acknowledgment to ensure understanding.

Country Meadows issues all direct care coworkers an iPhone to operate the Nurse Call System and for access/documentation to residents' Electronic Health Record. To better distinguish company issued cell phones, red cell phone cases were purchased on 8/30/26 to be more identifiable while monitoring for compliance.

Documentation on reeducation provided to DHS representative on 8/19/2026.

Licensee's Proposed Overall Completion Date: 09/09/2026

Implemented [REDACTED] - 09/11/2026)

231b - Medical Evaluation

2. Requirements

2600.

231.b. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner, documented on a form provided by the Department, within 60 days prior to admission. Documentation shall include the resident's diagnosis of Alzheimer's disease or other dementia and the need for the resident to be served in a secured dementia care unit.

Description of Violation

Resident [REDACTED] medical evaluation, dated [REDACTED], did not include the resident's height.

Plan of Correction

Accept [REDACTED] - 09/09/2026)

Resident [REDACTED]'s annual DME was completed on 7/27/2026 by resident's primary care physician. Through

231b Medical Evaluation (continued)

self auditing process, it was noted to be incomplete upon receipt. This version was uploaded in the resident's Electronic Health Record and labeled as "under review" until corrected version had been obtained. Once corrected, the "under review" document was not removed from the Electronic Health Record. Although the final DME was on site within the required time frame of completion, the wrong version was printed for the DHS representative on 8/19/2026.

All resident DMEs will continue to go through audit process conducted by Wellness Secretary, Director of Nursing, and Executive Director to ensure compliance. Auditing tool available upon request.

All completed resident DMEs will not be uploaded to resident Electronic Health Record until all audits are completed to prevent further incident.

Corrected DME uploaded to resident Electronic Health Record on 8/28/2026 within required time frame to meet annual requirements.

Licensee's Proposed Overall Completion Date: 09/09/2026

Implemented [REDACTED] 09/11/2026)