

Department of Human Services
Bureau of Human Service Licensing

June 21, 2021

[REDACTED], REGIONAL DIRECTOR OF OPERATIONS
CARE HSL BELLE REVE OPCO LLC
765 SKIPPACK PIKE, SUITE 300
BLUE BELL, PA 19422

RE: BELLE REVE SENIOR LIVING CENTER
404 EAST HARFORD STREET
MILFORD, PA, 18337
LICENSE/COC#: 22513

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/27/2021, 04/28/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Anne Graziano

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: BELLE REVE SENIOR LIVING CENTER **Licen e #:** 22513 **Licen e Expiration Date:** 06/25/2021
Addr e : 404 EAST HARFORD STREET, MILFORD, PA 18337
County: PIKE **Region:** NORTHEAST

Administrator

Name: [REDACTED] **Phone:** 5704099191 **Email:** [REDACTED]

Legal Entity

Name: CARE HSL BELLE REVE OPCO LLC
Address: 765 SKIPPACK PIKE, SUITE 300, BLUE BELL, PA, 19422
Phone: 5704099191 **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 03/27/2001 **Issued By:** L&I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 57 **Waking Staff:** 43

Inspection

Type: Full **Notice:** Unannounced **BHA Docket #:**
Rea on: Renewal **Exit Conference Date:** 04/28/2021

Inspection Dates and Department Representative

04/27/2021 - On-Site: [REDACTED]
04/28/2021 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 65 **Residents Served:** 40

Secured Dementia Care Unit

In Home: Yes **Area:** 3rd Floor **Capacity:** 19 **Re ident Served:** 15

Hospice

Current Residents: 2

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 40
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 17 **Have Physical Disability:** 0

Inspections / Reviews

04/27/2021 - Full

Lead Inspector: [REDACTED]

Follow Up Type: *POC Submission*

Follow-Up Date: *05/20/2021*

5/20/2021 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *05/27/2021*

6/21/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

51 - Criminal Background Check

1. Requirements

2600.

- 51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

Dietary staff member A hired on [REDACTED] does not have a criminal background check.

Plan of Correction

Accept

2600.51

What: Dietary staff member A hired on [REDACTED] does not have a criminal background check. This staff member turned [REDACTED] years old on [REDACTED] and criminal background check request was submitted that week and received on 5/3/21 (criminal background check cannot be processed prior to age [REDACTED]).

Who: The Business Office Director or designee will implement and train Business Office Associate on Plan of Correction (Attachment D) and document underage employees with outstanding background checks on Audit (Attachment E). Participants will complete Sign-in Sheet (Attachment F).

When: Business Office will put plan of correction into place by June 10, 2021.

How: Business Office staff will identify staff members hired under the age of 16, document, and set reminders for 16th birthday when background check can be initiated.

Ongoing: The Business Office Director or Designee will maintain a list of outstanding background checks due to age on Audit (Attachment E) and set reminder for 16th birthday when background check can be processed. Findings and trends will be reviewed at the QA meetings.

Completion Date: 05/19/2021

Update - 05/20/2021

Upon Resubmission of the Plan of Correction, the Adm will submit completed Sign In sheets filled in by the staff that actually attended the training. In order to be properly credited for the training, it is recommended that the training sheets include ALL of the information included in the MODEL forms found on the Department's Website. Otherwise proper credit may not be awarded.

Documents will be submitted via the Portal.

AG, 5-20-21

Document Submission

Implemented

See attached sign in sheet

documents reviewed in Portal

AG, 6-21-21

Update - 06/21/2021

103g - Storing Food

1. Requirements

2600.

- 103.g. Food shall be stored in closed or sealed containers.

103g - Storing Food (continued)

Description of Violation

A box of breaded veal located in the home's walk-in freezer was opened and unsealed.

Accept

Plan of Correction

2600.103(g)

What: A box of breaded veal located in the home's walk-in freezer was opened and unsealed.

Who: The Executive Director or designee will train the dietary team on Plan of Correction Training (Attachment A) and Audit (Attachment B) and complete Sign-in Sheet (Attachment C).

When: All dietary staff will complete training by June 10, 2021

How: All dietary staff will be retrained by Executive Director or designee on importance of storing food in sealed containers.

Ongoing: The Dietary Director or Designee will conduct weekly Quality Assurance audit of freezer and document on Audit (Attachment B) for first month and bi-weekly for the following two months. Findings and trends will be reviewed at the QA meetings.

Completion Date: 05/19/2021

Update - 05/20/2021

Upon Resubmission of the Plan of Correction, the Adm will submit Training Signature sheets that have been signed by the staff that were trained.

In order to be properly credited for the training, it is recommended that the training sheets include ALL of the information included in the MODEL forms found on the Department's Website. Otherwise proper credit may not be awarded.

Documents will be submitted via the Portal.

The home will also submit actual audit sheets that have been completed for review by the Department.

AG, 5-20-21

Document Submission

Implemented

See attached sign in sheet

Documents reviewed in Portal

AG, 6-21-21