

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

August 9, 2024

[REDACTED] COO
CARE HSL BELLE REVE OPCO LLC
[REDACTED]

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 06/19/2024 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: *BELLE REVE SENIOR LIVING CENTER* License #: *22513* License Expiration: *05/15/2025*
 Address: *404 EAST HARFORD STREET, MILFORD, PA 18337*
 County: *PIKE* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *CARE HSL BELLE REVE OPCO LLC*
 Address: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *99* Waking Staff: *74*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *06/19/2024*

Inspection Dates and Department Representative

06/19/2024 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *86* Residents Served: *70*

Secured Dementia Care Unit
 In Home: *Yes* Area: *3rd floor* Capacity: *40* Residents Served: *29*

Hospice
 Current Residents: *8*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *70*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *29* Have Physical Disability: *2*

Inspections / Reviews

06/19/2024 Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *07/21/2024*

08/05/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: *08/07/2024*
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *08/07/2024*

Inspections / Reviews *(continued)*

08/09/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/07/2024

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

224a - Preadmission Screen Form

1. Requirements

2600.

224.a. A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

Description of Violation

On [REDACTED] the home completed a Pre-Admission screening form for Resident # 1. The home failed to address the basic question that they could meet the needs of the resident by checking the YES box on the form. The box is BLANK.

Repeat Violation. 2-27-2024.

Plan of Correction

Accept [REDACTED] - 08/05/2024)

Immediate Corrective Actions: On 6/19/24, Resident 1's pre-admission screening form was updated by the Executive Director to include that the home could meet the needs of the resident by checking the yes box on the form. The Executive Director audited all of the residents' pre-admission screen forms in the home. All of the forms had yes checked that the home could meet the resident's needs by checking yes on the form.

Additional Corrective Actions: On 6/20/24, the Executive Director trained Resident Care Director, Memory Care Director, Business Office Director and Wellness Nurse on how to check the yes box on the pre-admission form when the home can meet the needs of the resident.

Ongoing Quality Assurance Actions: The Executive Director will complete a 30-day chart audit to assure the yes box is checked on pre-admission screening form that the home can meet the resident's needs, beginning 7/19/24. The Resident Care Director will review a sample of resident records each month as part of the QA process, beginning 7/19/24. This will be reviewed as part of the Quarterly QA Meetings, beginning 8/1/24.

Licensee's Proposed Overall Completion Date: 07/19/2024

Implemented [REDACTED] - 08/09/2024)