

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

October 31, 2024

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

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

[REDACTED],  
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/11/2024 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]

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]  
 Phone: [REDACTED] Email: [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: *09/11/2024*

**Inspection Dates and Department Representative**

*09/11/2024 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: *SDCU* 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**

**09/11/2024 - Partial**

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/12/2024*

**10/28/2024 - POC Submission**

Submitted By: [REDACTED] Date Submitted: *10/30/2024*  
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *10/30/2024*

Inspections / Reviews *(continued)*

10/31/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/30/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

23a - Activities of Daily Living Assistance

1. Requirements

2600.

23.a. A home shall provide each resident with assistance with ADLs as indicated in the resident's assessment and support plan.

Description of Violation

Resident [redacted] eloped from the facility on [redacted] and walked to town where the local police found the resident and assisted the home in locating the resident. Staff returned the resident to the home in a private vehicle shortly after without incident. The support plan indicates that Resident # [redacted] requires extensive supervision. The resident was without supervision while out of the building.

Plan of Correction

Accept [redacted] - 10/28/2024)

Immediate Corrective Action:

Direct Care Staff responded immediately to local Police call on 9/6/24. Resident [redacted] was transported back to the community by direct care staff. Resident [redacted] declined an Emergency Services assessment offered by Police, which was offered again at the community and refused again. Resident [redacted] was assessed by Memory care Director and Exec Director and noted to have no injuries. Resident [redacted] family and PCP notified on 9/6/24 by Memory Care Director. Resident [redacted] RASP was updated on 9/6/24 by ED, specifically noting Wanderguard placement occurred on 9/6/24, by ED. There have been no further incidents.

Additional Corrective Actions:

The Executive Director and Memory Care Director have reviewed the Elopement Policy with all community staff on 9/6/24 and 9/7/24. Signage was placed in all elevators on 9/6/24, by MCD to request visitors to travel alone/ personal group in elevators and not to use elevators with people unknown to them. Changes in Resident [redacted] care needs will be addressed through the RASP and subsequent Care Plan Conferences, with Personal Care staff providing oversight.

Ongoing Quality Assurance Actions:

The Memory Care Director will walk through the neighborhood at least 5 times per shift, beginning 10/1/24 to observe for concerns, changing needs, as well as to provide assistance and support as needed. As residents' needs or changes are identified, RASPs will be updated by the Memory Care Director. Changes and/or concerns will be reviewed as part of the Quarterly QA Meetings, beginning with the third quarter review to be held in January 2025.

Licensee's Proposed Overall Completion Date: 10/11/2024

Implemented [redacted] - 10/31/2024)