

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

November 27, 2024

[REDACTED]
BRODHEAD SENIOR LIVING LLC
[REDACTED]

RE: APPLE BLOSSOM SENIOR LIVING
125 APPLE BLOSSOM WAY
MOON TOWNSHIP, PA, 15108
LICENSE/COC#: 45072

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/07/2024 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: APPLE BLOSSOM SENIOR LIVING License #: 45072 License Expiration: 12/14/2024
 Address: 125 APPLE BLOSSOM WAY, MOON TOWNSHIP, PA 15108
 County: ALLEGHENY Region: WESTERN

Administrator

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

Legal Entity

Name: BRODHEAD SENIOR LIVING LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-2 Date: 08/27/2019 Issued By: Moon Township

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 150 Waking Staff: 113

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint Exit Conference Date: 11/07/2024

Inspection Dates and Department Representative

11/07/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 150 Residents Served: 110

Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:

Hospice
 Current Residents: 9

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 109
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 40 Have Physical Disability: 0

Inspections / Reviews

11/07/2024 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 11/22/2024

11/21/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 11/26/2024
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 11/27/2024

Inspections / Reviews *(continued)*

11/27/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/26/2024

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

225c - Additional Assessment

1. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

- 3. At the request of the Department upon cause to believe that an update is required.

Description of Violation

Resident [REDACTED] initial assessment, dated 3/10/24, was not updated to include multiple diagnoses indicated on the medical evaluation dated 10/2/24 to include: Bacteremia, Encephalopathy, Extended Spectrum Beta Lactamase Resistance, Unspecified Hydronephrosis, Thyrotoxicosis w/diffuse goiter w/o thyrotoxic crisis or storm, other peripheral vertigo, unspecified dementia, lower back pain, unspecified background retinopathy, constipation, and ataxic gait. Additionally, the assessment did not indicate the resident's sensory need for vision that was documented on the resident's preadmission screening form, dated 2/27/24, and indicated the resident uses glasses. The resident's initial assessment indicated total independence for bowel and bladder management. However, staff and resident interviews indicated that resident [REDACTED] receives help from direct care staff on an as needed basis with bowel and bladder management to include adult brief changes.

REPEAT VIOLATION 7/27/23 et. al.

Plan of Correction

Accept [REDACTED] - 11/21/2024)

The identified resident was not adversely affected. A new DME and RASP was completed on 11/7/24. A 30 day look back of new admissions and readmissions DME and RASP were reviewed for accuracy, this was completed on 11/19/24, no concerns identified. All new admission and readmission DME and RASPS will be reviewed for accuracy, audits will be completed weekly starting 11/25/24 for 4 weeks, then monthly times 3 months. Audits to be completed by Wellness Director or designee and reported to quality committee starting December 17, 2024 for further actions or audits needed.

Licensee's Proposed Overall Completion Date: 11/27/2024

Implemented [REDACTED] - 11/27/2024)