

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

April 16, 2025

[REDACTED]  
THE ROBERT PACKER HOSPITAL  
[REDACTED]

RE: THE ROBERT PACKER HOSPITAL  
PERSONAL CARE HOME  
603 WILLIAM STREER  
TOWANDA, PA, 18848  
LICENSE/COC#: 22987

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/04/2025 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: THE ROBERT PACKER HOSPITAL PERSONAL CARE HOME License #: 22987 License Expiration: 05/26/2025
Address: 603 WILLIAM STREER, TOWANDA, PA 18848
County: BRADFORD Region: NORTHEAST

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: THE ROBERT PACKER HOSPITAL
Address: [Redacted]
Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Type: I-1 Date: 01/07/2021 Issued By: PA Dept. of L&I

Staffing Hours

Resident Support Staff: 1 Total Daily Staff: 88 Waking Staff: 66

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint, Incident Exit Conference Date: 02/04/2025

Inspection Dates and Department Representative

02/04/2025 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information
License Capacity: 94 Residents Served: 84
Secured Dementia Care Unit
In Home: No Area: Capacity: Residents Served:
Hospice
Current Residents: 1
Number of Residents Who:
Receive Supplemental Security Income: 36 Are 60 Years of Age or Older: 0
Diagnosed with Mental Illness: 1 Diagnosed with Intellectual Disability: 3
Have Mobility Need: 3 Have Physical Disability: 0

Inspections / Reviews

02/04/2025 Partial
Lead Inspector: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 03/08/2025

Inspections / Reviews (*continued*)

## 04/02/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/03/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 04/04/2025

## 04/16/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/03/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

## 187b - Date/Time of Medication Admin.

## 1. Requirements

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

## Description of Violation

Resident [REDACTED] is prescribed [REDACTED] by mouth twice a day and [REDACTED] every 6 hours as needed. On [REDACTED], Staff A indicated that [REDACTED] was administered instead of [REDACTED] at 8am. The medication administration record for [REDACTED] was initialed as administered at 8am even though it was not.

## Plan of Correction

Accept [REDACTED] - 04/02/2025)

-Staff will receive review/education on the Personal Care Home Medication Administration Policy and will complete a sign off.

-On 2/19/25-2/20/25 staff attended a 4-hour medication administration review course conducted by an outside state trainer

-Medication administration visual audits will be conducted to ensure proper steps to medication administration. Leadership will conduct 10 audits/week. Audits will be weekly x4, then monthly x 3.

-Audit reviews will be reviewed at Senior Operations monthly

Licensee's Proposed Overall Completion Date: 03/07/2025

Implemented [REDACTED] - 04/16/2025)

## 187d - Follow Prescriber's Orders

## 2. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

## Description of Violation

Resident [REDACTED] is prescribed [REDACTED] by mouth twice a day. On 1/23/25, resident [REDACTED] was not administered the medication at 8am.

Repeat violation: [REDACTED] et al.

## Plan of Correction

Accept [REDACTED] - 04/02/2025)

-Staff will receive review/education on the Personal Care Home Medication Administration Policy and will complete a sign off.

-On 2/19/25-2/20/25 staff attended a 4-hour medication administration review course conducted by an outside state trainer

-Medication Administration Med books will be audited weekly. 10 audits/week x4 weeks, then monthly x 3 months

-Audit reviews will be reviewed at Senior Operations monthly

Licensee's Proposed Overall Completion Date: 03/07/2025

Implemented [REDACTED] - 04/16/2025)