

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

March 18, 2025

[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 02/25/2025 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: *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**

Type: *I-1* Date: *01/31/2022* Issued By: *L&I*

**Staffing Hours**

Resident Support Staff: Total Daily Staff: *125* Waking Staff: *94*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Incident* Exit Conference Date: *02/25/2025*

**Inspection Dates and Department Representative**

*02/25/2025 - On-Site* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: *86* Residents Served: *73*  
 Secured Dementia Care Unit  
 In Home: *Yes* Area: *N/A* Capacity: *40* Residents Served: *37*  
 Hospice  
 Current Residents: *7*  
 Number of Residents Who:  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *73*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *1*  
 Have Mobility Need: *52* Have Physical Disability: *0*

**Inspections / Reviews**

**02/25/2025 Partial**  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/17/2025*

**03/18/2025 - POC Submission**  
 Submitted By: [REDACTED] Date Submitted: *03/18/2025*  
 Reviewer: [REDACTED] Follow-Up Type: *Bypass Document Submission*

Inspections / Reviews *(continued)*

03/18/2025 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/18/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

Resident [redacted] and resident [redacted] reside in the secure dementia care unit of the home. On [redacted] at 6:30PM staff member [redacted] found resident [redacted] lying nude from the waist down on the bed of resident [redacted]. Resident [redacted] was standing on the side of the bed with their pants and briefs lowered with one foot on the floor and one leg bent onto the mattress. Due to cognitive decline and placement in a secure dementia care unit, neither resident can consent to a sexual relationship.

Plan of Correction

Accept [redacted] - 03/18/2025

Immediate Corrective Action:

Direct care staff responded immediately and redirected both residents to different areas where they were assessed and found to have no injuries. Neither resident was in distress, nor did either recall what happened. Resident #1 was redressed and escorted to the Memory Care activity room. Resident [redacted] RASP was updated on 1/31/25, 2/5/25 and 2/25/25 by the Executive Director. Resident [redacted] was able to dress himself and chose to remain in his room. Resident [redacted] RASP updated on 1/31/25 by Resident Care Director and additionally on 2/5/25 and 2/25/25 by the Executive Director. There have been no further incidents between them. Physicians and families were notified. Staff continue to observe all residents as they move throughout the Memory Care Neighborhood for appropriate interactions.

Additional Corrective Actions:

The Executive Director completed immediate in-servicing with staff regarding Resident Rights and Managing Sexual Interactions in a Memory Care Neighborhood on 2/3/25 and will complete additional reeducation at the next full employee meeting on 3/25/25 with the Resident Care Director. Staff will continue to observe residents as they move throughout the Memory Care Neighborhood, as they may enter one another's apartments, and will redirect them as needed. Changes in care needs will be addressed through the RASP and subsequent Care Plan Conferences as needed, with the Resident Care Director and Executive Director providing oversight to ensure it is done.

Ongoing Quality Assurance Actions:

The Executive Director and Resident Care Director will round periodically through the Memory Care Neighborhood daily to observe for concerns, changing needs, and provide assistance and support as needed. As residents' needs or changes are identified, RASPs will be updated by the Memory Care Director, Resident Care Director, or Executive Director. Changes and/or concerns will be reviewed as part of the Quarterly QA Meetings, beginning with the first quarter review to be held on April 11, 2025.

Licensee's Proposed Overall Completion Date: 03/14/2025

Implemented [redacted] - 03/18/2025