

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

July 7, 2025

[REDACTED]
THE ROBERT PACKER HOSPITAL
[REDACTED]
[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 04/24/2025 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

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 81 **Waking Staff:** 61

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**

Reason: Complaint **Exit Conference Date:** 04/24/2025

Inspection Dates and Department Representative

04/24/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 94 **Residents Served:** 81

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:** 81

Diagnosed with Mental Illness: 1 **Diagnosed with Intellectual Disability:** 1

Have Mobility Need: 0 **Have Physical Disability:** 1

Inspections / Reviews

04/24/2025 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 05/25/2025

05/20/2025 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 06/13/2025

Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 05/26/2025

Inspections / Reviews (*continued*)

05/29/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/13/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 06/02/2025

07/07/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/13/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

17 - Record Confidentiality

1. Requirements

2600.

17. Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

Description of Violation

On [REDACTED] at 10:35 AM privacy coding documents containing resident names were in a binder with the corresponding licensing inspection summaries from inspections on [REDACTED] and [REDACTED]. These documents were unlocked, unattended, and accessible at the reception area at the main entrance.

Plan of Correction

Accept [REDACTED] - 05/20/2025)

Per regulation, the licensing inspection summary is housed in public area for viewing. However, the privacy coding including the resident's name was attached to the two license inspection documents. Privacy coding sheets were immediately removed on 4/24/25, leaving only license inspection summary. Going forward, all future licensing inspection summaries that are placed in the binder, will have confirmation by the Administrator that no resident information is included. Audit was completed on 4/25/25 to confirm no other privacy coding sheets are found. Going forward, only license inspection sheets will be housed in the binder.

Licensee's Proposed Overall Completion Date: 05/20/2025

Implemented (RY - 07/07/2025)

181c - Self-administration Assessment

2. Requirements

2600.

- 181.c. The resident's assessment shall identify if the resident is able to self-administer medications as specified in § 2600.227(e) (relating to development of the support plan). A resident who desires to self-administer medications shall be assessed by a physician, physician's assistant or certified registered nurse practitioner regarding the ability to self-administer and the need for medication reminders.

Description of Violation

Resident [REDACTED] self-administers the medication [REDACTED]; however, resident [REDACTED] is assessed by the physician as not being able to self-administer any medications.

Repeated Violation - [REDACTED] et al

Plan of Correction

Accept [REDACTED] - 05/29/2025)

On 4/24/25, Administrator removed resident [REDACTED] individual medication from their room. Resident was educated on 4/24/25 to notify PCH staff when any medication is brought into the PCH so the medication can be secured within medication cart. Staff also educated to monitor for any medications within resident rooms via huddle. Resident's family will be reminded by the Administrator during their next visit as well as the next family council scheduled on August 11, 2025. Beginning May 1, 2025, PCH leadership team will complete audits of 10 rooms per month for 6 months to confirm that all medications are stored securely in medication cart and not in resident rooms unless approved for self-administration until 90% compliance is reached. Will extend additional 3 months for less than 90% compliance. Also beginning May 2025, all residents approved for self-administration of medications are being audited monthly

181c Self administration Assessment (continued)

to ensure medications are stored appropriately as well as ensuring medications are correct.

Licensee's Proposed Overall Completion Date: 05/28/2025

Implemented [REDACTED] - 07/07/2025)

183b - Meds and Syringes Locked**3. Requirements**

2600.

183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

Description of Violation

On [REDACTED] at 9:45 AM, 2 tubes of the medication [REDACTED] belonging to resident [REDACTED] were unlocked, unattended, and accessible on a table in shared room [REDACTED].

Plan of Correction

Accept [REDACTED] - 05/29/2025)

On 4/24/25, Administrator removed resident [REDACTED]'s individual medication from their room.

Resident was educated on 4/24/25 to notify PCH staff when any medication is brought into the PCH so the medication can be secured within medication cart. Staff also educated to monitor for any medications within resident rooms via

huddle. Resident's family will be reminded by the Administrator during their next visit as well as the next family council scheduled on August 11, 2025. Beginning May 1, 2025, PCH leadership team will complete audits of 10 rooms per month for 6 months to confirm that all medications are stored securely in medication cart or within the locked drawer in resident room (if approved for self administration) until 90% compliance is reached. Will extend additional 3 months for less than 90% compliance. Also beginning May 2025, all residents approved for self administration of medications are being audited monthly to ensure medications are stored appropriately as well as ensuring medications are correct.

Licensee's Proposed Overall Completion Date: 05/28/2025

Implemented [REDACTED] - 07/07/2025)