

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

June 30, 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 06/03/2025 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:** Dept. PA L&I

Staffing Hours

Resident Support Staff: **Total Daily Staff:** 85 **Waking Staff:** 64

Inspection Information

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

Reason: Interim **Exit Conference Date:** 06/03/2025

Inspection Dates and Department Representative

06/03/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 94 **Residents Served:** 82

Secured Dementia Care Unit

In Home: No **Area:** **Capacity:** **Residents Served:**

Hospice

Current Residents: 2

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 82

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

Have Mobility Need: 3 **Have Physical Disability:** 0

Inspections / Reviews

06/03/2025 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 06/23/2025

06/25/2025 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 06/26/2025

Reviewer: Corey Pica **Follow-Up Type:** Document Submission **Follow-Up Date:** 07/02/2025

Inspections / Reviews *(continued)*

06/30/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/26/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

181c Self administration Assessment

1. 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

At 11:24 a.m. a bottle of Sustain Complete eye drops was on the bathroom countertop of Resident [REDACTED]. The resident self-administers this medication but is not assessed to self-administer the medication according to their most recent medical evaluation dated [REDACTED].

At 11:55 a.m., [REDACTED] was on the bathroom sink countertop of Resident [REDACTED]. The resident self-administers this medication but is not assessed to self-administer the medication according to their most recent medical evaluation dated [REDACTED].

At 11:58 a.m., a box of [REDACTED] was on the bathroom sink countertop of Resident [REDACTED]. The resident self-administers this medication but is not assessed to self-administer the medication according to their most recent medical evaluation dated [REDACTED].

Repeat Violation: [REDACTED], et al.

Plan of Correction

Accept [REDACTED] - 06/25/2025)

On 6/3/25, Administrator removed resident [REDACTED], and [REDACTED]'s individual medication from their room. Resident was educated on 6/3/25 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 is completing 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 to ensure medications are stored appropriately as well as ensuring medications are correct.

Licensee's Proposed Overall Completion Date: 06/16/2025

Implemented [REDACTED] 06/30/2025)

183b Meds and Syringes Locked

2. 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

At 11:24 a.m. a bottle of [REDACTED] was unlocked and unattended on the countertop in resident [REDACTED] room.

At 11:55 a.m. [REDACTED] was unlocked and unattended on the bathroom sink countertop in Resident [REDACTED] room.

At 11:58 a.m. [REDACTED] was unlocked, unattended in the bathroom

183b - Meds and Syringes Locked (continued)

of Resident 3's room.

Plan of Correction**Accepted** [REDACTED] - 06/25/2025)

On 6/3/25, Administrator removed resident [REDACTED] and [REDACTED] individual medication from their room. Resident was educated on 6/3/25 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 is completing 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: 06/16/2025

Implemented [REDACTED] - 06/30/2025)