

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

June 2, 2026

[REDACTED]  
CLARKS SUMMIT AID II OPCO LLC  
[REDACTED]

RE: WILLOWBROOK PLACE  
150 EDELLA ROAD  
CLARKS SUMMIT, PA, 18411  
LICENSE/COC#: 22659

[REDACTED],  
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/07/2026 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]  
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

## Facility Information

Name: WILLOWBROOK PLACE

License #: 22659

License Expiration: 01/08/2027

Address: 150 EDELLA ROAD, CLARKS SUMMIT, PA 18411

County: LACKAWANNA

Region: NORTHEAST

## Administrator

Name: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

## Legal Entity

Name: CLARKS SUMMIT AID II OPCO LLC

Address: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

## Certificate(s) of Occupancy

Type: C-2 LP

Date: 06/10/1996

Issued By: L &amp; I

## Staffing Hours

Resident Support Staff:

Total Daily Staff: 52

Waking Staff: 39

## Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Complaint, Interim

Exit Conference Date: 05/07/2026

## Inspection Dates and Department Representative

05/07/2026 - On-Site: [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

License Capacity: 80

Residents Served: 41

## Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

## Hospice

Current Residents: 4

## Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 41

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 11

Have Physical Disability: 0

## Inspections / Reviews

05/07/2026 Partial

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 06/08/2026

06/02/2026 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/02/2026

Reviewer: [REDACTED]

Follow-Up Type: Bypass Document  
Submission

Inspections / Reviews *(continued)*

06/02/2026 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/02/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

## 187d - Follow Prescriber's Orders

## 1. Requirements

2600.

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

## Description of Violation

Resident [REDACTED] is prescribed [REDACTED] 1 tablet by mouth with PLS>55 two times per day at 8 a.m. and 8 p.m. On [REDACTED] at 8 p.m. the resident's pulse reading was 76, the resident was not administered 1 tablet per prescriber orders.

## Plan of Correction

Accept [REDACTED] - 06/02/2026)

*What Happened / Cause of Deficiency*

The deficiency occurred because medication administration staff failed to follow the physician's order after obtaining and documenting the resident's pulse reading. The medication administration staff overlooked or misinterpreted the medication parameters and did not administer the medication despite the resident meeting the prescribed requirement for administration.

*Why the Deficiency Happened*

The deficiency resulted from inadequate attention to medication administration parameters, failure to verify physician orders during medication pass, and insufficient oversight of medication administration practices.

*Immediate Corrective Action*

1. Resident [REDACTED]'s physician orders and Medication Administration Record (MAR) were immediately reviewed by the Resident Wellness Director/designee.
2. Resident [REDACTED] was assessed for any adverse effects related to the missed medication dose, and the physician was notified of the medication omission as appropriate.
3. The medication administration staff received immediate re-education regarding:
  - o Following physician orders exactly as written.
  - o Reviewing medication parameters prior to withholding medications.
  - o Proper medication documentation procedures.
4. A review of all current residents with medications containing administration parameters was completed to ensure medications were administered according to physician orders.

*Prevention of Recurrence*

1. Medication administration staff will be required to verify all medication parameters before withholding any medication.
2. weekly audits of medications with parameters for 4 weeks to ensure medications are administered according to physician orders.
3. Monthly audits will be conducted for an additional 2 months to ensure ongoing compliance.
4. Staff will immediately notify the supervisor and physician if there is uncertainty regarding medication administration instructions.
5. Random MAR reviews will continue as part of the facility's quality assurance process to ensure compliance with physician orders and medication administration regulations.

Licensee's Proposed Overall Completion Date: 06/01/2026

Implemented [REDACTED] - 06/02/2026)