

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

October 8, 2025

[REDACTED]
ROSEBROOK OPCO LLC
[REDACTED]
[REDACTED]

RE: ADULT LIVING AT ROSEBROOK
723 SOUTH PIKE ROAD
SARVER, PA, 16055
LICENSE/COC#: 44961

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/17/2025 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: ADULT LIVING AT ROSEBROOK **License #:** 44961 **License Expiration:** 03/01/2026
Address: 723 SOUTH PIKE ROAD, SARVER, PA 16055
County: BUTLER **Region:** WESTERN

Administrator

Name: [REDACTED] **Phone:** [REDACTED] **Email:** [REDACTED]

Legal Entity

Name: ROSEBROOK OPCO LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 06/02/2003 **Issued By:** L&I0

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 113 **Waking Staff:** 85

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 09/17/2025

Inspection Dates and Department Representative

09/17/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 100 **Residents Served:** 83

Secured Dementia Care Unit

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

Hospice

Current Residents: 10

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 83
Diagnosed with Mental Illness: 11 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 30 **Have Physical Disability:** 0

Inspections / Reviews

09/17/2025 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 10/05/2025

10/06/2025 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 10/06/2025
Reviewer: [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 10/09/2025

Inspections / Reviews *(continued)*

10/08/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/06/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

85b - Infestation**1. Requirements**

2600.

85.b. There may be no evidence of infestation of insects or rodents in the home.

Description of Violation

On [REDACTED] it was reported that when resident [REDACTED] motorized wheelchair was sent out for repair, it was infested with cockroaches. Resident and staff interviews indicate cockroaches have been found in resident [REDACTED] bedroom.

Plan of Correction

Accept [REDACTED] - 10/06/2025)

A new motorized wheelchair was delivered for resident [REDACTED] 1 in August. Pearce Pest Control has been coming and continues to come to Rosebrook on a monthly and on an as needed basis to treat. Records are kept on site. Pearce Pest control does exterminate resident [REDACTED] room each visit. The maintenance and housekeeping supervisors will monitor the room twice a week for one month and weekly thereafter. Documentation will be kept. The maintenance and housekeeping supervisors will deep clean the room weekly. Documentation will be kept. The maintenance and housekeeping supervisors were educated by the administrator on 9/29/2025 to report to the administrator immediately if any insects are seen. Documentation will be kept. The administrator and DON conducted a quality management review on 9/29/2025 of all items specified in 2600.85b. Documentation of the quality review will be kept.

Licensee's Proposed Overall Completion Date: 09/29/2025

Implemented [REDACTED] - 10/08/2025)