

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

September 30, 2025

[REDACTED]
BRODHEAD SENIOR LIVING LLC
[REDACTED]
[REDACTED]

RE: APPLE BLOSSOM SENIOR LIVING
125 APPLE BLOSSOM WAY
MOON TOWNSHIP, PA, 15108
LICENSE/COC#: 45072

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/05/2025 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: APPLE BLOSSOM SENIOR LIVING **License #:** 45072 **License Expiration:** 12/14/2025
Address: 125 APPLE BLOSSOM WAY, MOON TOWNSHIP, PA 15108
County: ALLEGHENY **Region:** WESTERN

Administrator

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

Legal Entity

Name: BRODHEAD SENIOR LIVING LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-2 **Date:** 08/27/2019 **Issued By:** Moon Township

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 135 **Waking Staff:** 101

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 09/05/2025

Inspection Dates and Department Representative

09/05/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 150 **Residents Served:** 105

Secured Dementia Care Unit

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

Hospice

Current Residents: 17

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 104
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 30 **Have Physical Disability:** 1

Inspections / Reviews

09/05/2025 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 09/19/2025

09/15/2025 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 09/29/2025
Reviewer: [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 09/29/2025

Inspections / Reviews *(continued)*

09/30/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/29/2025

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

At approximately 9:20am, a binder containing numerous narcotic count logs was unlocked, unattended and accessible on top of the medication cart in the 1st floor care base area, to include the narcotic count logs for the following residents:

- Resident [REDACTED] -Take 1 tablet by mouth 3 times daily
- Resident [REDACTED] -Take 1 tablet by mouth 2 times daily as needed
- Resident [REDACTED] -Take 1 tablet by mouth every 8 hours as needed

Plan of Correction

Accept [REDACTED] 09/15/2025)

the narcotics log including residents [REDACTED] were immediately secured on 9/5/25. Employee responsible was immediately educated on 9/5/25. all other clinical staff educated on 9/5 and 9/6/25 in accordance with 2600.65.i. starting on 9/5/25 daily audits to ensure compliance x one week then, weekly times 4 weeks. audits will be reviewed at the quality management meeting on 9/29/25. The quality management meeting shall include a review of all items specified in 2600.26.b. Documentation of review shall be kept.

Licensee's Proposed Overall Completion Date: 09/30/2025

Implemented [REDACTED] - 09/30/2025)

141b1 Annual Medical Evaluation

2. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident [REDACTED] most recent medical evaluation, dated [REDACTED] indicates "see attached" under the medication addendum section; however, there is nothing attached to resident [REDACTED] medical evaluation.

REPEAT VIOLATION: [REDACTED] et. al.

Plan of Correction

Accept [REDACTED] - 09/15/2025)

after exited chart was reexamined and medication list was found in the chart. Education on proper chart order given to Wellness Director on 9/5/25. all other staff educated on 9/10/25 in accordance with 2600.65.i. starting on 9/5/25. will audit 5 random charts weekly x 6 weeks starting on 9/6/25. audits will be reviewed at the quality management meeting on 9/29/25. The quality management meeting shall include a review of all items specified in 2600.26.b. Documentation of review shall be kept.

Licensee's Proposed Overall Completion Date: 09/30/2025

Implemented [REDACTED] - 09/30/2025)

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

At approximately 9:20am, resident [REDACTED] was unlocked, unattended, and accessible on top of the medication cart, located in the open 1st floor care base area.

Plan of Correction**Accept [REDACTED] - 09/15/2025)**

resident [REDACTED]'s [REDACTED] was immediately secured in medication cart on 9/5/25. Medication Aide educated immediately on proper medication storage on 9/5/25 all other clinical staff educated on proper medication storage on 9/5 and 9/6/25 in accordance with 2600.65.i. starting on 9/5/25 daily audits to ensure compliance x one week then, weekly times 4 weeks. audits will be reviewed at the quality management meeting on 9/29/25. The quality management meeting shall include a review of all items specified in 2600.26.b. Documentation of review shall be kept.

Licensee's Proposed Overall Completion Date: 09/30/2025

Implemented [REDACTED] - 09/30/2025)