



pennsylvania
DEPARTMENT OF HUMAN SERVICES

SENT VIA EMAIL: grenwick@integracare.com
lputzzier@integracare.com

MAILING DATE: April 3, 2020

Ms. Loriann Putzier
Chief Operating Officer
Tithonus Butler, LP
c/o Integracare Corporation
6600 Brooktree Court, Suite 1000
Wexford, Pennsylvania 15090

RE: Newhaven Court at Clearview
100 Newhaven Lane
Butler, Pennsylvania 16001
Certificate #: 423460

Dear Ms. Putzier:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on January 8, 2020, of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Jody Garvey".

Jody Garvey
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

RECEIVED
3/17/20
Western Region Field Office
Bureau of Human Services Licensing

Facility Information

Name: *NEWHAVEN COURT AT CLEARVIEW*
Address: *100 NEWHAVEN LANE, BUTLER, PA 16001*
County: *BUTLER* Region: *WESTERN*

License Number: *42346*

Administrator

Name: *Gary Renwick* Phone: *7244778713* Email: *LPUTZIER@INTEGRACARE.COM*

Legal Entity

Name: *TITHONUS BUTLER LP*
Address: *6600 BROOKTREE COURT, SUITE 1000, C/O INTEGRACARE CORP, WEXFORD, PA, 15090*

Certificate(s) of Occupancy

Type: *C-2 LP* Date: Issued By:

Staffing Hours

Resident Support Staff: Total Daily Staff: *137* Waking Staff: *103*

Inspection

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

Inspection Dates and Department Representative

01/08/2020 - On-Site: Laurie Garrigan

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *115* Residents Served: *105*

Secured Dementia Care Unit

In Home: *Yes* Area: *Memory Care* Capacity: *18* Residents Served: *17*

Hospice

Current Residents: *13*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *105*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *32* Have Physical Disability: *0*

15a - Resident Abuse Report

Regulations

2600.

15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

On 8/31/19, resident's #1 and #2 reported to staff person A, the home's Executive Operations Officer, that they had money missing from a purse and wallet in their apartment. However, the home did not notify the local Area Agency on Aging until 1/8/2020 at 12:13 p.m.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

See page 2A+2B of 3

Legal Entity Representative


Signature 

Printed Name and Title Gary Renwick, Executive Operations Officer Date 3-13-20

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The above plan of correction is approved as of 3/24/20 (Date)

Plan of correction implementation status as of 3/24/20 (Date)

The above plan of correction was approved by  (Initials)

Implemented
 Not Implemented

Community Name: Newhaven Court at Clearview
 License Number: 423460
 Date of Visit: 1/8/20
 Date of Submission: 3/13/2020

1. Violation Review: 2600.15.a –

The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701-10225.707) and 6 Pa. Code Sections 15.21-15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

2. Review the Citation, the violation of the Regulation:

- On 8/31/19, resident's #1 and #2 reported to staff person A, the home's Executive Operations Officer, that they had money missing from a purse and wallet in the apartment. However, the home did not notify the local Area Agency on Aging until 1/8/20 at 12:13pm.

3. Description of the Repair of the Immediate Problem:

- A report of stolen money was made by the resident to the Executive Operations Officer (EOO) on Saturday, 8/31/19. Through cooperation with the resident and family, a surveillance device was set up by the Safety & Maintenance Engineer (SME) on 9/2/19 in the apartment along with cash belonging to the home. In an effort to catch the thief, the cash was staged in the resident's purse in the same location of the alleged theft on 8/31/19. The cash utilized in this sting operation was photocopied for verification. Starting on 9/2/19, the surveillance video was closely monitored by the EOO & SME. On 9/10/19 at approximately 12:45pm, the SME discovered that the cash was missing from the resident's purse. The video tape was immediately viewed, and it shows a direct care staff stealing money from the resident's purse and placing it in her pants pocket. The PA State Police were immediately contacted. A Trooper with the PA State Police arrived at the home, took a statement, viewed the video surveillance, confiscated the cash and verified that the stolen cash was an exact match to the photocopies made. The direct care staff was arrested, removed from the home, and employment immediately terminated. The Resident & POA were contacted to inform them of the situation.

4. Detail Action Steps / System Developed to prevent future occurrence and Designated position responsible with target dates for completion:

- Executive Operations Officer reviewed regulation 15.21-15.27 as defined in the Regulatory Compliance Guide to ensure full understanding of the regulation.
- Beginning the week of 3/16/20, the Executive Operations Officer will review all reported incidents and any allegations of abuse at least weekly to ensure any allegations of abuse and reportable incidents are reported in accordance with the Older Adult Protective Services Act and the Department of Human Services regulations. This review will occur weekly for the next 6 months (3/16/20-9-16/20) to ensure compliance. Documentation of this review shall be kept on file.

Authorized Signature _____

Date: _____

3-17-20

- Staff Training via Relias On-line Academy was assigned and opened to all staff persons on 3/12/20, as part of the 2020 annual training plan on Resident Rights and Mandatory reporting of Abuse & Neglect. A mass text message via On-Shift was sent to all staff on 3/17/20 requiring the aforementioned trainings to be completed by 4/15/20. Verification of flyer and mass message attached and kept on file.
- Resident Rights, Elder Abuse, and Mandatory Reporting reinforced during General Orientation for new hires as it relates to the regulation and company standard.
- Documentation of staff education shall be kept on file.
- The Executive Operations Officer will continue to monitor this training is completed annually and as part of the new hire orientation for new staff persons.

Authorized Signature 

Date: 3-17-20

Plan of Correction Template

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ADM040

16c - Written Incident Report

Regulations

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On 8/31/19, resident's #1 and #2 reported to staff person A, the home's Executive Operations Officer, that they had money missing from a purse and wallet in their apartment. However, the home did not notify the Department's personal care home regional office of the incident until 9/11/19 at 12:20 p.m.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

See Pages 3A and 3B of 3

Legal Entity Representative

Gary Renwick
Signature

Gary Renwick, Executive Operations Officer
Printed Name and Title
3-13-20 Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 3/24/20
(Date)

Plan of correction implementation status as of 3/24/20
(Date)

The above plan of correction was approved by *[Signature]*
(Initials)

Implemented
 Not Implemented

Community Name: Newhaven Court at Clearview
License Number: 423460
Date of Visit: 1/8/20
Date of Submission: 3/13/20

1. Violation Review: 2600.16.c –

The home shall report the incident or condition to the Department’s personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law.)

2. Review the Citation, the violation of the Regulation:

- On 8/31/19, resident’s #1 and #2 reported to staff person A, the home’s Executive Operations Officer, that they had money missing from a purse and wallet in the apartment. However, the home did not notify the Department’s personal care home regional office of the incident until 9/11/19 at 12:20pm.

3. Description of the Repair of the Immediate Problem:

- A report of stolen money was made by the resident to the Executive Operations Officer (EOO) on Saturday, 8/31/19. Through cooperation with the resident and family, a surveillance device was set up by the Safety & Maintenance Engineer (SME) on 9/2/19 in the apartment along with cash belonging to the home. In an effort to catch the thief, the cash was staged in the resident's purse in the same location of the alleged theft on 8/31/19. The cash utilized in this sting operation was photocopied for verification. Starting on 9/2/19, the surveillance video was closely monitored by the EOO & SME. On 9/10/19 at approximately 12:45pm, the SME discovered that the cash was missing from the resident's purse. The video tape was immediately viewed, and it shows a direct care staff stealing money from the resident's purse and placing it in her pants pocket. The PA State Police were immediately contacted. A Trooper with the PA State Police arrived at the home, took a statement, viewed the video surveillance, confiscated the cash and verified that the stolen cash was an exact match to the photocopies made. The direct care staff was arrested, removed from the home, and employment immediately terminated. The Resident & POA were contacted to inform them of the situation.

4. Detail Action Steps / System Developed to prevent future occurrence and Designated position responsible with target dates for completion:

- Executive Operations Officer reviewed regulation 2600.16 as defined in the Regulatory Compliance Guide to ensure full understanding of the regulation.
- Beginning the week of 3/16/20, the Executive Operations Officer will review all reported incidents and conditions at least weekly, including any allegations of abuse, to ensure all reportable incidents and conditions are reported to the Department in accordance with regulation 2600.16c. This review will occur weekly for the next 6 months (3/16/20-9-16/20) to ensure compliance. Documentation of this review shall be kept on file.

Authorized Signature 

Date: 3-17-20

- Staff Training via Relias On-line Academy was assigned and opened to all staff persons on 3/12/20, as part of the 2020 annual training plan on Resident Rights and Mandatory reporting of Abuse & Neglect. A mass text message via On-Shift was sent to all staff on 3/17/20 requiring the aforementioned trainings to be completed by 4/15/20. Verification of flyer and mass message attached and kept on file.
- Resident Rights, Elder Abuse, and Mandatory Reporting reinforced during General Orientation for new hires as it relates to the regulation and company standard.
- Documentation of staff education shall be kept on file.
- The Executive Operations Officer will continue to monitor this training is completed annually and as part of the new hire orientation for new staff persons.

Authorized Signature Gay Orl

Date: 3-17-20

Plan of Correction Template

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