

Department of Human Services
Bureau of Human Service Licensing

December 4, 2020

SNH PENN TENANT LLC
255 WASHINGTON STREET,SUITE 300
TWO NEWTON PLACE
NEWTON, MA, 2458

RE: TIFFANY COURT AT KINGSTON
700 NORTHAMPTON STREET
KINGSTON, PA, 18704
LICENSE/COC#: 22822

Dear Ms. Francis,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/22/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Michele Moskalczyk
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary (LIS)

cs: Pennsylvania Bureau of Human Service Licensing

**Department of Human Services
Bureau of Human Service Licensing
LICENSE INSPECTION SUMMARY**

Facility Information

Name: *TIFFANY COURT AT KINGSTON* License #: *22822* License Expiration Date: *01/01/2021*
 Address: *700 NORTHAMPTON STREET, KINGSTON, PA 18704*
 County: *LUZERNE* Region: *NORTHEAST*

Administrator

Name: *Denise Sherrill* Phone: *5702832336* Email:
dsherrill@5ssl.com, lindscott@pa.gov,
mmoskalczy@pa.gov

Legal Entity

Name: *SNH PENN TENANT LLC*
 Address: *255 WASHINGTON STREET,SUITE 300, TWO NEWTON PLACE, NEWTON, MA, 2458*
 Phone: *5702832336* Email: *LICENSING@5SSL.COM*

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *08/29/1996* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *121* Waking Staff: *91*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint* Exit Conference Date: *06/26/2020*

Inspection Dates and Department Representative

06/22/2020 - Off-Site: Pamela Harris

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *110* Residents Served: *110*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *61*
 Diagnosed with Mental Illness: *2* Diagnosed with Intellectual Disability: *1*
 Have Mobility Need: *11* Have Physical Disability: *0*

Inspections / Reviews

06/22/2020 - Partial

Lead Inspector: *Pamela Harris*Follow-Up Type: *POC Submission*Follow-Up Date: *07/19/2020*

7/16/2020 - POC Submission

Lead Reviewer: *Michele Moskalczyk*Follow-Up Type: *Document Submission*Follow-Up Date: *07/25/2020*

12/4/2020 - Document Submission

Lead Reviewer: *Michele Moskalczyk*Follow-Up Type: *Not Required*

187a - Medication Record

1. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

Description of Violation

Resident 1 is prescribed Calcium Vitamin D two times a day. However, resident's medication administration record does not indicate that she received her 12pm dosage on 6/13 and 6/14. On 6/16, 6/17 and 6/18 no documentation of Hold for a hospital stay. Gabapentin 100mg three times daily. The 12 pm dosage was not documented as Hospital or Leave of absence on 6/16, 6/17, and 6/18. The medical record was blank on all of the dates listed above for both medications. The home is not maintaining the MAR's properly.

Plan of Correction - 07/16/2020**Accept**

Director of Resident Care or designee, if DRC is off, will in-service medication techs and LPN's, by 7/24/2020, on proper documentation of medication administration, including documentation when a resident is at hospital. Director of Resident Care will monitor weekly times 8 weeks then monthly times 2 months. Executive Director or designee will do periodic checks to monitor for compliance.

Completion Date: 07/24/2020

Update - 07/24/2020

Please submit proof of training to the department of the home's ongoing compliance with this regulation.

Document Submission - 12/04/2020**Implemented**

see attached in-service sheet