

Department of Human Services
Bureau of Human Service Licensing

January 6, 2022

[REDACTED]
MILLETT PINES LLC
1300 MORGAN HIGHWAY
CLARKS SUMMIT, PA, 18411

RE: THE PINES AT CLARKS SUMMIT
1300 MORGAN HIGHWAY
CLARKS SUMMIT, PA, 18411
LICENSE/COC#: 22612

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/19/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Michele Moskalczyk

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *THE PINES AT CLARKS SUMMIT* License #: 22612 License Expiration: 11/05/2021
Address: 1300 MORGAN HIGHWAY, CLARKS SUMMIT, PA 18411
County: LACKAWANNA Region: NORTHEAST

Administrator

Name: [REDACTED] Phone: 5705877709 Email: [REDACTED]

Legal Entity

Name: *MILLETT PINES LLC*
Address: 1300 MORGAN HIGHWAY, CLARKS SUMMIT, PA, 18411
Phone: 5705877709 Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *06/30/2016* Issued By: *South Abington Twp*

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 57 Waking Staff: 43

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Incident* Exit Conference Date: *08/19/2021*

Inspection Dates and Department Representative

08/19/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 72 Residents Served: 44

Secured Dementia Care Unit

In Home: *Yes* Area: *Evergreen* Capacity: 24 Residents Served: 11

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 44
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 13 Have Physical Disability: 0

Inspections / Reviews

08/19/2021 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *11/27/2021*

Inspection Dates and Department Representative (*continued*)

12/13/2021 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *12/20/2021*

01/06/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

185a - Implement Storage Procedures

1. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

On 8/13/21 it was discovered during a change of shift by staff persons A and B that one Diazepam pill was missing from the blisterpack belonging to resident #1.

The home was unable to determine what happened to the missing pill. However, it was determined that not all staff were signing the shift-to-shift Narcotic Count Verification forms which, according to their medication storage policy, are required to be signed by oncoming and offgoing staff at every shift change.

Staff did not sign the forms on 8/12/21 at the 3pm shift change. Staff also did not sign the forms on 8/5/21 at the 7am shift change.

Plan of Correction**Accept**

This regulation is important to ensure the safety of residents, their medications and medical equipment because it reduces the risk that medications and medical equipment will be misplaced, lost, or misused by another resident. In order to ensure accountability for controlled substances, policies and procedures have been put in place to ensure proper handling and tracking of medication, with additional procedures in place for controlled medication. All Medication Technicians and Nurses administering medications are given a thorough orientation on the policies and procedures related to medications, and observe and participate in the procedures during the orientation process. Staff administering medication know that at the change of each shift the oncoming and outgoing staff persons involved in medication administration jointly count all controlled medications. The shift to shift Narcotics Count Verification form will then be signed by both the outgoing and the oncoming staff person at each change of shift to verify that all medications are accounted for. If the count is not accurate an investigation is immediately begun. After completing a thorough investigation, we were unable to determine what happened to the missing pill. A reportable incident form was immediately submitted to the local Bureau of Human Services Licensing office. Statements were obtained from all staff involved. The local police were notified of the missing pill.

The General Manager immediately re-reviewed the signature policy with all Med Techs and Nurses. The importance of this procedure was highly stressed and the example of the missing medication was highlighted.

The Director of Wellness and Wellness supervisors will monitor for missing signatures daily and ensure the policies and procedures are being followed.

The Administrator/Designee will monitor to ensure ongoing compliance with this policy.

Completion Date: 08/20/2021

Update: 12/13/2021

Please send/Attach proof of staff training. 12-13-2021 MM

Document Submission**Implemented**

Please see the attached staff training

Completion Date: 12/22/2021