

Department of Human Services
Bureau of Human Service Licensing

February 1, 2022

[REDACTED]
TITHONUS CLEARFIELD LP
[REDACTED]
[REDACTED]

RE: COLONIAL COURTYARD AT
CLEARFIELD
1300 LEONARD STREET
CLEARFIELD, PA, 16830
LICENSE/CO# : 44733

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/09/2021, 09/10/2021, 09/14/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Jason Williams

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: COLONIAL COURTYARD AT CLEARFIELD License #: 44733 License Expiration: 03/28/2022
Address: 1300 LEONARD STREET, CLEARFIELD, PA 16830
County: CLEARFIELD Region: WESTERN

Administrator

Name: [REDACTED] Phone: 8147652246 Email: [REDACTED]

[REDACTED]
Name: TITHONUS CLEARFIELD LP
Address: [REDACTED]
Phone: 8147652246 Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-1 Date: 12/28/2015 Issued By: Lawrence Township
Type: I-2 Date: 12/25/2015 Issued By: Lawrence Township

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 89 Waking Staff: 67

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint Exit Conference Date: 09/14/2021

Inspection Dates and Department Representative

09/09/2021 - Off-Site: [REDACTED]
09/10/2021 - Off-Site: [REDACTED]
09/14/2021 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 74 Residents Served: 59

Special Care Unit

In Home: Yes Area: Memory Care Capacity: 22 Residents Served: 17

Hospice

Current Residents: 2

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 59
Diagnosed with Mental Illness: 2 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 30 Have Physical Disability: 2

Inspections / Reviews

09/09/2021 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/11/2021*

12/21/2021 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *12/31/2021*

02/01/2022 - Document Submission

Reviewer: [REDACTED] Follow-Up Type: *Not Required*

187d Follow prescriber's orders

1. Requirements

2800.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

On 8/20/21, resident #1 was prescribed assistance with feeding with all foods removed from room when finished due to aspiration risk. However, resident # 1 has not been assisted by staff with feeding, including on 9/9/21, for breakfast and lunch due to the resident wanting to self feed.

Plan of Correction**Accept**

Community Name: Colonial Courtyard at Clearfield

License Number: 447330

Date of Visit: 9/9/21

Date of Submission: 12/7/21

1. Violation Review:

2800.187.d. The home shall follow the directions of the prescriber.

2. Violation Interpretative Statement:

On 8/20/21, resident #1 was prescribed assistance with feeding with all foods removed from room when finished due to aspiration risk. However, resident # 1 has not been assisted by staff with feeding, including on 9/9/21, for breakfast and lunch due to the resident wanting to self feed.

3. Review the benefit of the Regulation, per RCG:

Ensures that residents receive medications and treatments as ordered by a physician.

4. Description of the Repair of the Immediate Problem:

██████████ CRNP was contacted during surveyor visit 9/9/21 for clarification regarding this order. ██████ desired to d/c the order and was not in ██████ office. ██████ faxed an order to d/c the order to feed the resident on 9/10/21 when ██████ was back in ██████ office. The resident desired to feed ██████ and was able to do so safely.

5. Determine / document the Root Cause of the Violation:

Need for clarification of order received from CRNP as well as updates of ASPs with residents on mechanically altered diets to include aspiration precautions.

187d Follow prescriber's orders (continued)

6. Detail Action Steps / System Developed to prevent future occurrence:

a. Changing practice? Orders will be reviewed by RWD/designee within 24 hours of receipt/visit to ensure that they meet our requirements and both parties understand the intent and purpose. All ASPs of residents on mechanically altered diets will be updated to include aspiration precautions.

b. Teaching or Training? CRNP educated regarding our services. Staff will be re-educated regarding clarity of orders and process to ensure they are complete and meet our requirements/expectations and any concerns with resident compliance are addressed. Staff will also be educated regarding mechanically altered diets and aspiration precautions. The trainings will occur at our December all staff meeting.

c. On-going Monitoring? RWD/designee will review new orders to ensure that they meet our requirements and expectations. RWD/designee will review and update, as needed, the ASPs of all residents on mechanically altered diets to include aspiration precautions.

7. Designated position responsible and specify target date for correction. RWD/Designee 12/31/21

Document Submission

Implemented

See attached documentation

225b Assessment content

1. Requirements

2800.
225.b. The assessment must, at a minimum include the following:

Description of Violation

Resident # 1's assessment, dated [redacted]/21, does not address the resident's need for assistance with feeding due to aspiration risk, assistance in ambulation and repositioning due to the resident's need for 2-person assistance and does not indicate the services hospice provides.

Plan of Correction

Accept

Community Name: Colonial Courtyard at Clearfield
License Number: 447330
Date of Visit: 9/9/21
Date of Submission: 12/2/21

225b Assessment content (continued)**1. Violation Review:**

2800.225.b. The assessment must, at a minimum include the following:

- (1) The resident's need for assistance with ADLs and IADLs.
- (2) The mobility needs of the resident.
- (3) The ability of the resident to self-administer medication.
- (4) The resident's medical history, medical conditions, and current medical status and how these impact or interact with the individual's service needs.
- (5) The resident's need for supplemental health care services.
- (6) The resident's need for special diet or meal requirements.
- (7) The resident's ability to safely operate key-locking device

2. Violation Interpretative Statement:

Resident # 1's assessment, dated [REDACTED]/21, does not address the resident's need for assistance with feeding due to aspiration risk, assistance in ambulation and repositioning due to the resident's need for 2-person assistance and does not indicate the services hospice provides.

3. Review the benefit of the Regulation, per RCG:

Allows residences to create a comprehensive profile of a resident's needs and serves as the basis for the plan to meet those needs.

4. Description of the Repair of the Immediate Problem:

ASP was updated 9/17/21 to reflect the resident being a 2 person transfer regarding transfers and ambulation. Resident condition had improved and she remained able to feed herself independently.

5. Determine / document the Root Cause of the Violation:

Staff needing further education regarding detailed and individualized information needed on each ASP. ASP needed updated regarding mechanically altered diet and aspiration precautions.

6. Detail Action Steps / System Developed to prevent future occurrence:

a. Changing practice? RWD performing ASP management at this time. ASPs of residents with mechanically altered diets will be updated to include aspiration precautions.

b. Teaching or Training? RWD new to process and is in the process of training with EOO on entry of ASPs. Anyone assisting with ASPs in the future will be provided training regarding the need for detailed information on ASPs as well as aspiration precautions on the ASP for anyone with mechanically altered diets.

225b Assessment content (continued)

- c. *On-going Monitoring? EOO and RWD working together to audit all ASPs for detail and updated information by 1/31/22. ASPs for residents with mechanically altered diets will be updated with aspiration precautions by 12/31/21*
7. *Designated position responsible and specify target date for correction. RWD/designee 1/31/22*

Document Submission***Implemented***

See attached documentation. Thank you for your help!