

Department of Human Services
Bureau of Human Service Licensing

May 16, 2022

[REDACTED], OWNER /ADMINISTRATOR

RE: TILBURG'S HOME FOR THE YOUNG
AT HEART
801 MARKET STREET
WILLIAMSPORT, PA, 17701
LICENSE/COC#: 21839

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/01/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

[REDACTED]
Human Services Licensing Supervisor

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: *TILBURG'S HOME FOR THE YOUNG AT HEART* License #: *21839* License Expiration: *03/21/2023*
Address: *801 MARKET STREET, WILLIAMSPORT, PA 17701*
County: *LYCOMING* Region: *NORTHEAST*

Administrator

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

Legal Entity

[REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *08/28/2001* Issued By: *PA L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *14* Waking Staff: *11*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *02/01/2022*

Inspection Dates and Department Representative

02/01/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *24* Residents Served: *14*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *8* Are 60 Years of Age or Older: *5*
Diagnosed with Mental Illness: *14* Diagnosed with Intellectual Disability: *4*
Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

02/01/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/29/2022*

Inspections / Reviews (*continued*)

05/05/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *05/12/2022*

05/16/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

89b - Hot Water Temperature

1. Requirements

2600.

89.b. Hot water temperature in areas accessible to the resident may not exceed 120°F.

Description of Violation

The home's water temperature had a reading of 136°F when the temperature was checked in the first and second floor bathrooms at the time of inspection.

Plan of Correction

Accept

Hot water temperature was adjusted to 120 F on 02/01/2022.

A check was made on 02/02/2022 to verify correct temperature. Hot water was readjusted when temperature was too high. A check was made on 02/03/2022 and temperature was 120 F.

Monthly temperature readings will be taken to ensure compliance.

Completion Date: 02/04/2022

Update: 05/05/2022

The administrator or designee shall monitor monthly for ongoing compliance. 5-5-22 MM

Document Submission

Implemented

The administrator or designee shall monitor monthly for ongoing compliance. 5-5-22 MM

182c - Medication Administration

1. Requirements

2600.

182.c. Medication administration includes the following activities, based on the needs of the resident:

Description of Violation

The home did not have a Medication Administration trainer available for the years of 2020 & 2021.

Staff person "A" completed their initial Medication Administration training in 6/2001, but no Medication Pass Observations and MAR reviews were completed during training years 2020 & 2021.

Staff Person "B" completed their initial Medication Administration training in 10/2018, but no Medication Pass observations or MAR reviews were completed during training years 2020 thru 2021.

Staff person "C" completed their initial Medication Administration training in 12/2018, but no Medication Pass Observations or MAR reviews completed during training years 2020 & 2021.

Plan of Correction

Accept

There was no trainer available due to COVID.

Medication Administration re-training was completed 02/16/2022 by Christina Callahan.

[REDACTED] has agreed to return to complete Medication Pass Observations and MAR reviews. Staff person C no longer is employed here.

Completion Date: 02/16/2022

182c - Medication Administration (continued)

Update: 05/05/2022

Please send/Attach proof of compliance. 5-5-22 MM

Document Submission

Implemented

Please send/Attach proof of compliance. 5-5-22 MM

Four attachments were provided on 5-11-22.

184a - Labeling OTC/CAM

1. Requirements

2600.

184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

Description of Violation

Resident #1's [redacted] pen did not have a pharmacy label on the medications that were currently in use for the resident.

Plan of Correction

Accept

Completion Date: 02/01/2022

Update: 05/05/2022

The administrator or designee shall monitor monthly for ongoing compliance. 5-5-22 MM

Document Submission

Implemented

The administrator or designee shall monitor monthly for ongoing compliance. 5-5-22 MM

190a - Completion Medication Course

1. Requirements

2600.

190.a. A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

Description of Violation

The home's Medication Train the Trainer's certification expired. The home didn't have a qualified trainer in the home for training years 2020 and 2021.

Plan of Correction

Accept

There was no trainer available due to COVID.

Medication Administration re-training was completed 02/16/2022 by [redacted].

Ms. Callahan has agreed to return to complete Medication Pass Observations and MAR reviews.

Completion Date: 02/16/2022

Update: 05/05/2022

The administrator or designee shall monitor medication training monthly, for ongoing compliance.

Please send/Attach proof of compliance. 5-5-22 MM

190a - Completion Medication Course (continued)**Document Submission*****Implemented***

The administrator or designee shall monitor medication training monthly, for ongoing compliance.

Please send/Attach proof of compliance. 5-5-22 MM