

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

February 14, 2023

[REDACTED]
SNH PENN TENANT LLC
[REDACTED]

RE: CLARKS SUMMIT SENIOR LIVING
950 MORGAN HIGHWAY
CLARKS SUMMIT, PA, 18411
LICENSE/COC#: 22821

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/24/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: CLARKS SUMMIT SENIOR LIVING License #: 22821 License Expiration: 01/01/2023

Address: 950 MORGAN HIGHWAY, CLARKS SUMMIT, PA 18411

County: LACKAWANNA Region: NORTHEAST

Administrator

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

Legal Entity

Name: SNH PENN TENANT LLC

Address: [REDACTED]

Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 13 Total Daily Staff: 109 Waking Staff: 82

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:

Reason: Complaint Exit Conference Date: 10/24/2022

Inspection Dates and Department Representative

10/24/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 120 Resident Served: 83

Secured Dementia Care Unit

In Home: No Area: Capacity: Resident Served:

Hospice

Current Resident : 4

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 83

Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0

Have Mobility Need: 13 Have Physical Disability: 0

Inspections / Reviews

10/24/2022 Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 11/18/2022

12/21/2022 - POC Submission

Submitted By: [REDACTED] Date Submitted: 01/30/2023

Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 12/28/2022

Inspections / Reviews *(continued)*

01/20/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/30/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 01/27/2023

02/14/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/30/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

17 - Record Confidentiality

1. Requirements

2600.

17. Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

Description of Violation

The MARS and narcotic count books were left unlocked and unattended on top of the two medication carts located in the lobby area of the home. The MARS and narcotic count books contain confidential information of the residents.

Plan of Correction

Accept [redacted] - 01/20/2023)

- All med techs and LPN's have been retrained and educated on regulation 17 and appropriate med administration procedures.
 - Director of Resident Care/designee will randomly check carts for compliance twice a week for 6 weeks.
 - MAR will be secured in cart and cart will be locked when left unattended.
- DRC/DESIGNEE WILL BE RESPONSIBLE FOR ONGOING COMPLIANCE.

SEE ATTACHED TRAINING & COMPLETED CART AUDIT

Licensee's Proposed Overall Completion Date: 12/27/2022

Implemented [redacted] 02/14/2023)

85a - Sanitary Conditions

2. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

At approximately [redacted] am a staff member was observed dropping a residents pill on the floor, picking it back up and putting it in a medication cup to be administered.

Plan of Correction

Accept [redacted] - 01/20/2023)

- Director of Resident Care provided education to med techs and LPN's on hand hygiene to include either handwashing or hand sanitizing
 - Director of Resident Care will observe a med pass for all Med techs and LPN's.
- DRC/DESIGNEE WILL BE RESPONSIBLE FOR ONGOING COMPLIANCE.
SEE ATTACHED MED PASS AUDIT.

Licensee's Proposed Overall Completion Date: 12/27/2022

Implemented [redacted] 02/14/2023)

183b - Meds and Syringes Locked

3. Requirements

2600.

183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

183b - Meds and Syringes Locked (continued)**Description of Violation**

At approximately [REDACTED] am a medication cart located in the lobby of the home was left unlocked and unattended.

Plan of Correction

Accept [REDACTED] 01/20/2023)

- All med techs and LPN's have been retrained and educated on regulation 183B and appropriate med administration procedures.
- Director of Resident Care/designee will randomly check carts for compliance twice a week for 6 weeks.
- MAR will be secured in cart and cart will be locked when left unattended.

DRC/DESIGNEE WILL BE RESPONSIBLE FOR ONGOING COMPLIANCE.

SEE ATTACHED TRAINING & CART AUDIT

Licensee's Proposed Overall Completion Date: 12/27/2022

Implemented [REDACTED] - 02/14/2023)