

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

March 7, 2023

[REDACTED], ADMINISTRATOR
SNH PENN TENANT LLC

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

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/24/2023, 01/26/2023 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: *TIFFANY COURT AT KINGSTON* License #: *22822* License Expiration: *01/01/2024*
 Address: *700 NORTHAMPTON STREET, KINGSTON, PA 18704*
 County: *LUZERNE* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *SNH PENN TENANT LLC*
 Address: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *12/17/1997* Issued By: *PALI*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *95* Waking Staff: *71*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *01/26/2023*

Inspection Dates and Department Representative

01/24/2023 - On-Site: [REDACTED]
 01/26/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *110* Residents Served: *89*

Secured Dementia Care Unit
 In Home: *No* Area: Capacity: Residents Served:

Hospice
 Current Residents: *3*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *88*
 Diagnosed with Mental Illness: *5* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *6* Have Physical Disability: *0*

Inspections / Reviews

01/24/2023 Full
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/05/2023*

03/06/2023 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *03/06/2023*
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *03/10/2023*

Inspections / Reviews *(continued)*

03/07/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/06/2023

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

91 - Telephone Numbers

1. Requirements

2600.

91. Emergency Telephone Numbers - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

Description of Violation

There were no emergency numbers posted by the landline telephone in the fireside lounge.

Plan of Correction

Accept ([REDACTED]) - 03/06/2023)

Housekeeping Director in-serviced housekeeping staff on what numbers are required to be posted by each phone on 2/24 to 2/28/2023. Housekeeping staff will monitor that phone numbers are posted when doing daily rounds. Housekeeping Director will do weekly checks x 4 weeks to ensure compliance. Executive Director will do periodic checks to monitor compliance.

Licensee's Proposed Overall Completion Date: 03/02/2023

Implemented ([REDACTED]) - 03/07/2023)

103e - Left Overs

2. Requirements

2600.

- 103.e. Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

Description of Violation

There was an unlabeled container of food found in the refrigerator located in the BTR dining room.

Plan of Correction

Accept ([REDACTED]) - 03/06/2023)

F&BD (food & beverage director) in-serviced dietary staff regarding labeling, sealing and dating any item that is opened on 2/24 to 2/27/2023. Refrigerators will be checked daily by dietary staff to ensure proper dating of items and ensuring that items are not out of date. The dishwasher position will be responsible for checking the Refrigerator in BTR. F&BD will audit daily x 2 weeks and weekly x 4 weeks. ED (Executive Director) will do periodic checks to monitor compliance.

Licensee's Proposed Overall Completion Date: 03/02/2023

Implemented ([REDACTED]) - 03/07/2023)

187a - Medication Record

3. Requirements

2600.

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

187a Medication Record (continued)

Description of Violation

The Medication Administration Record for Resident 1 indicated that the resident received their PRN medication of [REDACTED] at [REDACTED] and [REDACTED] on [REDACTED]. There was no reason documented for administering the PRN nor the effectiveness of the medication.

Plan of Correction

Accept [REDACTED] - 03/06/2023)

DRC (Director of Resident Care) provided in service to med techs/LPN's on properly administering and documenting a PRN medication on the MAR on 2/23, 2/24 and 2/26 DRC will audit 3 MAR's weekly x 4 weeks then monthly x 2 months to ensure compliance. ED (Executive Director) will do periodic checks to monitor compliance

Licensee's Proposed Overall Completion Date: 03/02/2023

Implemented [REDACTED] - 03/07/2023)

187d - Follow Prescriber's Orders

4. Requirements

2600.

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

Description of Violation

Resident 2's glucometer indicated a blood sugar level of [REDACTED] at [REDACTED] on [REDACTED]. The prescriber's order states that the resident should receive 2 units of [REDACTED] with a blood sugar reading of [REDACTED] but the MAR indicates that [REDACTED] units were given.

Plan of Correction

Accept [REDACTED] - 03/06/2023)

DRC (Director of Resident Care) provided in service to med techs/LPN's on properly reading insulin coverage scale and proper documentation on 2/23, 2/24 and 2/26/2023 DRC will audit all insulin coverage scales weekly x 4 weeks then monthly x 2 months to ensure compliance. ED (Executive Director) will do periodic checks to monitor compliance.

Licensee's Proposed Overall Completion Date: 03/02/2023

Implemented [REDACTED] - 03/07/2023)

227d - Support Plan Medical/Dental

5. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Resident 3 utilizes a bed cane on their bed. Their RASP dated [REDACTED] does not indicate that a bed cane is utilized by the resident.

227d - Support Plan Medical/Dental (*continued*)**Plan of Correction****Accept** [REDACTED] - 03/06/2023)

ED in-serviced DRC on updating RASP with assistive devices to bed on 2/23/2023. DRC audited residents in building and listed all residents with Assistive bed device and made sure all RASP were updated on [REDACTED]. DRC will update RASP at time device is added and annually. ED will do Periodic checks to monitor compliance.

Licensee's Proposed Overall Completion Date: 03/02/2023**Implemented** [REDACTED] - 03/07/2023)