

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

May 7, 2024

[REDACTED]
MILLETT PINES LLC
[REDACTED]

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

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/02/2024 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: *THE PINES AT CLARKS SUMMIT* License #: *22612* License Expiration: *11/05/2024*
 Address: *1300 MORGAN HIGHWAY, CLARKS SUMMIT, PA 18411*
 County: *LACKAWANNA* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *MILLETT PINES LLC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-2* Date: *06/30/2016* Issued By: *South Abington Township*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *77* Waking Staff: *58*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *04/02/2024*

Inspection Dates and Department Representative

04/02/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *72* Residents Served: *54*

Secured Dementia Care Unit
 In Home: *Yes* Area: *n/a* Capacity: *24* Residents Served: *23*

Hospice
 Current Residents: *2*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *54*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *23* Have Physical Disability: *0*

Inspections / Reviews

04/02/2024 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/02/2024*

05/07/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *05/07/2024*
 Reviewer: [REDACTED] Follow-Up Type: *Bypass Document Submission*

Inspections / Reviews *(continued)*

05/07/2024 - Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/07/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

187b - Date/Time of Medication Admin.

1. Requirements

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

On [redacted] Staff Person B administered resident [redacted] ([redacted]) [redacted] tablets at bedtime, however, did not document the medication was administered on the Medication Administration record. The resident was then given another dose of the medication by Staff Person A causing the resident to get double the dose prescribed by the resident's physician.

Plan of Correction

Accept [redacted] - 05/07/2024)

A medication record is kept for each resident for whom the facility is administering medication. That medication record is commonly referred to as the MAR. Proper MAR use is critical as it creates a record of medication administration which allows everyone involved in the resident's care to know when a medication was last administered and creates a system to account for medications. State regulations specify what must be included in the MAR. The date and time of medication administration and the name and initials of the staff person administering the medication are required. Failure to document a dose of medication can result in administration of another dose by a different staff person since there is no record of the already-administered dose. This is what happened in this case. The possibility of medication errors is a constant area of concern. It is important that staff follow the steps in the medication administration policy as this policy contains critical information about the proper steps for safe administration to ensure errors are prevented. The immediate documentation of the administration of a medicine is critical in preventing medication errors.

POC: The medication error was immediately reported to the Director of Wellness. The physician on-call was informed of the error immediately. Frequent monitoring of the resident's vital signs were initiated. Frequent observations of the resident were begun. No adverse reactions were observed. The Director of Wellness discussed what happened with each Med Tech.

The facility's Policy and Procedure for Administration of Medications was reviewed with each Med Tech with special attention to the need for immediate documentation when medications are given. Both Med Techs understand and agree to abide by the Policy and Procedure. Both Med Techs will be closely monitored to ensure they are following the proper steps for medication administration and documentation.

Licensee's Proposed Overall Completion Date: 05/03/2024

Implemented [redacted] - 05/07/2024)

187d - Follow Prescriber's Orders

2. Requirements

2600.

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

Description of Violation

On [redacted] Staff Person B administered resident [redacted] ([redacted]) [redacted] tablets at bedtime, however, did not document the medication was administered on the Medication Administration record. The resident was then given another dose of the medication by Staff Person A causing the resident to get double the dose prescribed by the resident's physician.

Plan of Correction

Accept [redacted] - 05/07/2024)

Due to the missed documentation of the medication administration in the MAR, the resident received an additional dose of the medicine. This was not how the physician had ordered the medication to be given.

187d - Follow Prescriber's Orders (continued)

POC: The medication error was immediately reported to the Director of Wellness when it was discovered. The physician on-call was immediately notified. Frequent vital signs were taken. The resident was monitored closely for 24 hours and no adverse reactions were noted. The Director of Wellness discussed what happened with each Med Tech. The facility's Policy and Procedure for Administration of Medications was reviewed with each Med Tech with special attention to the need for immediate documentation when medications are given. Both Med Techs understand and agree to abide by the Policy and Procedure. Both Med Techs will be closely monitored to ensure they are following the proper steps for medication administration and documentation. This will then ensure the facility is following the directions of the prescriber.

Licensee's Proposed Overall Completion Date: 05/03/2024

Implemented [REDACTED] - 05/07/2024)