

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

January 22, 2025

[REDACTED]  
SNH PENN TENANT LLC  
[REDACTED]

ATTN LICENSING  
[REDACTED]

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

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/10/2024 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: *TIFFANY COURT AT KINGSTON* License #: *22822* License Expiration: *01/01/2026*  
 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]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *12/17/1997* Issued By: *L&I*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *104* Waking Staff: *78*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Incident* Exit Conference Date: *12/10/2024*

**Inspection Dates and Department Representative**

12/10/2024 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *110* Residents Served: *82*

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

**Hospice**  
 Current Residents: *5*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *80*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *22* Have Physical Disability: *0*

**Inspections / Reviews**

12/10/2024 Partial  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *01/05/2025*

01/07/2025 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: *01/12/2025*  
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *01/14/2025*

Inspections / Reviews *(continued)*

01/22/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/12/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

## 227c Support Plan Revision

**1. Requirements**

2600.

227.c. The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment.

**Description of Violation**

Resident [REDACTED] assessment and support plan, dated 7/26/24, was not updated as the residents needs changed.

1. Personal care needs of resident indicate bladder management, bowel management, shopping, and managing finances are not applicable. Staff interviews revealed resident is not always continent of bowel and bladder and needs assistance with shopping and managing finances.
2. Resident moved into the home memory care unit, not secured, on [REDACTED]. However, Supervision states that resident requires no supervision in the home.
3. No medical or psychological diagnoses were listed in section 2 or 3.
4. Section 3 - behavioral or cognitive needs indicate that the resident has no problem in any of the areas including orientation to place/time/person, irritability, judgement, and agitation. However, resident was moved to dementia unit on [REDACTED]

**Plan of Correction**

Accept [REDACTED] - 01/07/2025)

Executive Director will provide education to Director of Health and Wellness and Assistant Resident Services Director on 2600. 227.c. The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment.

Executive Director will perform audit on all RASPS in community to ensure assessments are current by 01/05/2025. Assistant Resident Services Director will be responsible for completion of initial, annual, department request and significant change RASPS

Director of Health and Wellness or designee will audit 2 residents' RASPs weekly x 4 weeks then biweekly x 4 weeks then monthly x 1 month to ensure the resident's needs have been updated appropriately to ensure compliance with regulation 227c.

Licensee's Proposed Overall Completion Date: 01/05/2025

Implemented [REDACTED] - 01/22/2025)