

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

August 26, 2026

[REDACTED]
KINGSTON PA SLC TENANT LLC

[REDACTED]
TWO NEWTON LACE
[REDACTED]

RE: TIFFANY COURT AT KINGSTON
700 NORTHAMPTON STREET
KINGSTON, PA, 18704
LICENSE/COC#: 23319

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/21/2026 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 #: 23319

License Expiration: 11/14/2026

Address: 700 NORTHAMPTON STREET, KINGSTON, PA 18704

County: LUZERNE

Region: NORTHEAST

Administrator

Name:

Phone:

Email:

Legal Entity

Name: KINGSTON PA SLC TENANT LLC

Address:

Phone:

Email:

Certificate(s) of Occupancy

Type: C-2 LP

Date: 05/10/1996

Issued By: L & I

Staffing Hours

Resident Support Staff:

Total Daily Staff: 86

Waking Staff: 65

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Complaint

Exit Conference Date: 07/21/2026

Inspection Dates and Department Representative

07/21/2026 - On-Site:

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 110

Residents Served: 75

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 4

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 75

Diagnosed with Mental Illness: 3

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 11

Have Physical Disability: 2

Inspections / Reviews

07/21/2026 Partial

Lead Inspector:

Follow-Up Type: POC Submission

Follow-Up Date: 08/16/2026

08/18/2026 - POC Submission

Submitted By:

Date Submitted: 08/25/2026

Reviewer:

Follow-Up Type: Document Submission Follow-Up Date: 08/25/2026

Inspections / Reviews (*continued*)

08/26/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/25/2026

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

At 9:07 a.m., a medication cart with a computer on top was stored in hallway near the activity room. The computer screen was open and resident [REDACTED] medication record was visible.

Plan of Correction

Accept [REDACTED] 08/18/2026)

*On 7/21/26, during the survey, Med Tech locked the computer to ensure resident record confidentiality.

*On 7/21/26, Division Director of Resident Care (DDRC) provided retraining to Executive Director (ED) on regulation 17.

*On 7/21/26, ED provided retraining to the Med Tech involved on regulation 17.

*On 7/21/26, ED conducted walking rounds around the community and ensured confidentiality of all resident records.

*By 8/21/26, ED or Director of Health and Wellness (DHW) will provide retraining to all staff on regulation 17.

*Starting the week of 8/17/26, ED, DHW or designee will conduct walking rounds around the community to ensure resident record confidentiality three times weekly x 4 weeks then twice weekly x 4 weeks then weekly x 4 weeks to ensure ongoing compliance with regulation 17.

Licensee's Proposed Overall Completion Date: 10/09/2026

Implemented [REDACTED] - 08/26/2026)

121a - Unobstructed Egress

2. Requirements

2600.

- 121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

At 9:15 a.m., A cleaning cart and laundry cart was stored in the hallway outside of the proposed memory care wing exit, and blocked egress to the emergency exit.

Plan of Correction

Accept [REDACTED] - 08/18/2026)

*On 7/21/26, during the survey, the Director of Facilities (DOF) removed cleaning cart and laundry cart from the hallway.

*On 7/21/26, DDRC provided retraining to ED on regulation 121a.

*On 7/21/26, ED provided retraining to the DOF on regulation 121a.

*On 7/21/26, DOF provided retraining to housekeeper involved on regulation 121a.

*On 7/21/26, DOF checked all other egress routes and ensured they were unobstructed.

*By 8/21/26, DOF or ED will provide retraining to all team members on regulation 121a.

*Starting the week of 8/17/26, DOF or designee will audit 2 egress routes twice weekly x 4 weeks, then weekly x 4

121a Unobstructed Egress (continued)

weeks, then biweekly x 4 weeks to ensure ongoing compliance with regulation 121a.

Licensee's Proposed Overall Completion Date: 10/09/2026

Implemented [REDACTED] - 08/26/2026)

185a - Implement Storage Procedures**3. Requirements**

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident [REDACTED] is prescribed [REDACTED] Give 1 tab by mouth daily as needed ([REDACTED] and [REDACTED] [REDACTED] Give 1 cap by mouth twice daily as needed for pain [REDACTED]). These medications were not available to be given if needed on [REDACTED], and [REDACTED]

Plan of Correction

Accept [REDACTED] - 08/18/2026)

*On 7/8/26, resident [REDACTED] was admitted to the hospital and never returned to the community.

*On 7/21/26, DDRC provided retraining to ED on regulation 185a.

*On 8/11/26, ED provided retraining to new DHW on regulation 185a.

*By 8/14/26, the ED, who is an LPN and a Pennsylvania Medication Administration Train the Trainer, will provide retraining to all staff who are certified or licensed to administer medications on regulation 185a, including if a medication is unavailable to immediately contact the pharmacy and notify the DHW and ED. DHW or ED will immediately contact the resident's primary care provider (PCP), obtain orders and follow up with the pharmacy, if needed.

*By 8/21/26, DHW or designee will perform electronic medication administration record (eMAR) to medication cart audit for current residents to ensure compliance with regulation 185a. If any areas of noncompliance are identified, DHW or designee will immediately contact the pharmacy and, if needed, the PCP to obtain orders. Then DHW or designee will notify the resident and [REDACTED] responsible party.

*Starting the week of 8/24/26, DHW or designee will perform eMAR to medication cart audit on one medication cart weekly for 12 weeks to ensure ongoing compliance with regulation 185a. If any areas of noncompliance are identified, DHW or designee will immediately contact the pharmacy and, if needed, the PCP to obtain orders. Then DHW or designee will notify the resident and [REDACTED] responsible party.

Licensee's Proposed Overall Completion Date: 10/30/2026

Implemented [REDACTED] 08/26/2026)

187d - Follow Prescriber's Orders**4. Requirements**

2600.

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

187d Follow Prescriber's Orders (continued)

Description of Violation

Resident [REDACTED] was not administered the following medications as prescribed:

7/6/26, [REDACTED], give 1 tab by mouth at bedtime.

7/7/26, [REDACTED] by mouth one time a day, [REDACTED]

[REDACTED] 1 puff by mouth in the morning, [REDACTED] Give 1 tabs by mouth every other day.

7/6/26 & 7/7/26, [REDACTED] tablet Give 1 tab by mouth at bedtime.

7/7/26 & 7/8/26, [REDACTED] Give 1 tab by mouth every morning and at bedtime, [REDACTED]

[REDACTED] Give 1 tablet by mouth in the morning, [REDACTED] Give 1 tablet by mouth in the morning, [REDACTED] Give 1 tab by mouth in the morning, [REDACTED] Give 1 tab by mouth in the morning.

On 7/6/26, 7/7/26, & 7/8/26, [REDACTED] Inject per Sliding Scale subcutaneously before meals and at bedtime, [REDACTED] Give 1 cap by mouth every morning and at bedtime.

Resident [REDACTED] was not administered the following medications as prescribed:

[REDACTED] from 6/30/26 to 7/13/26, [REDACTED] from 6/30/26 to 7/9/26, [REDACTED] from 6/30/26 to 7/11/26, and [REDACTED] 3 caps on 6/30/26 and on 7/1/26.

Plan of Correction

Accept [REDACTED] - 08/18/2026)

*On 7/16/26, ED assessed resident [REDACTED] and no ill effects were noted from missed doses of medication. Resident, RP and PCP were notified. No new orders were received.

*On 7/16/26, ED submitted a reportable incident to the Bureau of Human Services Licensing (BHSL) for these medication errors.

*On 7/21/26, DDRC provided retraining to ED on regulation 187d.

*On 8/11/26, ED provided retraining to new DHW on regulation 187d.

*By 8/14/26, the ED, who is an LPN and a Pennsylvania Medication Administration Train the Trainer, will provide retraining to all staff who are certified or licensed to administer medications on regulation 187d.

*By 8/21/26, DHW or designee will perform eMAR to medication cart audit for current residents to ensure compliance with regulation 187d. If any areas of noncompliance are identified, DHW or designee will immediately contact the pharmacy and, if needed, the PCP to obtain orders. Then DHW or designee will notify the resident and [REDACTED] responsible party.

*Starting the week of 8/24/26, DHW or designee will perform eMAR to medication cart audit on one medication cart weekly for 12 weeks to ensure ongoing compliance with regulation 187d. If any areas of noncompliance are identified, DHW or designee will immediately contact the pharmacy and, if needed, the PCP to obtain orders. Then DHW or designee will notify the resident and [REDACTED] responsible party.

Licensee's Proposed Overall Completion Date: 10/30/2026

Implemented [REDACTED] - 08/26/2026)

188b - Medication Error Reporting

5. Requirements

2600.

188.b. A medication error shall be immediately reported to the resident, the resident's designated person and the prescriber.

188b - Medication Error Reporting (continued)

Description of Violation

Resident [REDACTED]'s medication administration record indicates refusals on 7/7/26 at 9 p.m. for [REDACTED].
 [REDACTED] Give 1 tab by mouth at bedtime for [REDACTED], and on 7/8/26 at 8:00 a.m. for [REDACTED].
 [REDACTED] Give 1 tablet by mouth One time a day related to major depressive disorder. The residents' prescriber was notified of the refusals.

Plan of Correction

Accept [REDACTED] 08/18/2026)

*On 7/21/26, DDRC provided retraining to ED on regulation 188b.

*On 7/21/26, ED made resident [REDACTED] as well as the responsible party and nurse practitioner for resident [REDACTED] aware of medication refusals for [REDACTED] on 7/7/26 at 9pm and [REDACTED] on 7/8/26 at 8am. No new orders were received.

*On 08/11/26, ED provided retraining to new DHW on regulation 188b.

*By 8/14/26, the ED, who is an LPN and a Pennsylvania Medication Administration Train the Trainer, will provide retraining to all staff who are certified or licensed to administer medications on regulation 188b.

*By 8/21/26, DHW or designee will audit eMARs for current residents for July 2026 to ensure compliance with regulation 188b. If any areas of noncompliance are identified, DHW or designee will immediately contact the PCP then follow any orders, if provided. Then DHW or designee will notify the resident and [REDACTED] responsible party.

*Starting the week of 8/24/26, DHW or designee will audit 3 residents eMARs three times weekly x 4 weeks, then twice weekly x 4 weeks, then weekly x 4 weeks to ensure ongoing compliance with regulation 188b. If any areas of noncompliance are identified, DHW or designee will immediately contact the PCP and follow any orders, if provided. Then DHW or designee will notify the resident and [REDACTED] responsible party.

Licensee's Proposed Overall Completion Date: 10/09/2026

Implemented [REDACTED] - 08/26/2026)