



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: September 15, 2016

Ms. Loriann Putzier, President & COO
Tithonus Clearfield, LP
6600 Brooktree Court, Suite 1000
Wexford, Pennsylvania 15090

RE: Colonial Courtyard at Clearfield
1300 Leonard Street
Clearfield, Pennsylvania 16830
Certificate #: 447330

Dear Ms. Putzier:

As a result of the Department of Human Services' licensing inspection on June 10, 2016 of the above facility, the violations with 55 Pa.Code Ch. 2800 (relating to Assisted Living Residences) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2800 must be maintained.

Sincerely,

Gloria Emick
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

LICENSING INSPECTION SUMMARY

Assisted Living Residences – 55 Pa.Code § 2800

| | | | |
|--|--|---|--|
| PCH Name: Colonial Courtyard at Clearfield | | License Number: 447330 | |
| Address: 1300 Leonard Street Clearfield, Pennsylvania 16830 | | County: Clearfield | |
| Administrator: Candy Shomo | | | |
| Legal Entity Name: Tithonus Clearfield, LP | | | |
| Legal Entity Address: 6600 Brooktree Court., Suite 1000 Wexford, Pennsylvania 15090 | | | |
| Certificate(s) of Occupancy: I-1, I-2 (Lawrence Twp.) 12/28/15 | | | |
| Type of Inspection: Partial | | | |
| Reason(s) for Inspection(s): 90 day interim inspection | | | |
| On-Site Inspections Dates and Department Representatives On-Site: June 10, 2016 Doug Hoover | | | |
| Off-Site Inspection Dates and Inspectors, if Applicable: NA | | | |
| Resident Demographic Data as of Inspection Dates | | | |
| Licensed Capacity: 74 Number of Residents Served: 33 Secured Dementia Care Unit in Home: Yes Area: 1 st Floor Secured Unit Capacity, if Applicable: 17 Number of Residents Served in Secured Dementia Care Unit, if applicable: 4 Number of Current Hospice Residents: 0 Number of Hospice Residents in past year: 0 | | Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 33 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 17 Have a Physical Disability: 0 | |

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SEP 14 2016

CENTRAL REGION FIELD OFFICE
Human Services Licensing

~~Page 1~~

LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

Regulation

105g - To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.

Violation

The lint trap of the empty dryer in the resident laundry room contained lint.

Plan of Correction

See Attached Page 2A of 4.

Printed Name and Title of Legal Entity Representative (Required on all pages)

Signature of Legal Entity Representative (Required on all pages)

Gandy Shamo, Executive director
Gandy Shamo Date 8-31-16

DEPARTMENT USE ONLY – HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 9-15-16
(Date)

The above plan of correction was approved by SE
(Initials)

Plan of correction implementation status as of 9-15-16:
(Date)

- ☐ Fully Implemented
- ☒ Partially Implemented – Adequate Progress
- ☐ Partially Implemented – Inadequate Progress
- ☐ Not Implemented

PLAN OF CORRECTION

Community Name: Colonial Courtyard at Clearfield

License Number: 447330

Date of Visit: June 10, 2016

Date of Submission: August 31, 2016

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of 4
JH

1. Violation Review: The lint trap of the empty dryer in the resident laundry room contained lint.
2. Violation Interpretative Statement: 2800 105g- To reduce the risks of fire hazards, lint shall be removed from the lint trap
3. Review the benefit of the Regulation, per RCG: Greatly Reduces the chance of fire in the home
4. Description of the Repair of the Immediate Problem: Posted a laminated memo, informing residents and staff to empty the dryer lint trap after each use. I sign off log for each shift was also placed in the resident laundry room. Staff has been educated on the need to check the dryers at the end of each shift to ensure that the lint trap is clean. This log will be audited by the Maintenance Supervisor on a weekly basis and has been added to his Electronic Maintenance Program (TELS)
5. Determine / document the Root Cause of the Violation: Residents use the dryer daily and may forget to empty the lint trap after each use. A memo has been posted to remind them, but it will also be the responsibility of the staff to ensure that this is being done at the end of each shift.
6. Detail Action Steps / System Developed to prevent future occurrence: Maintenance supervisor will be responsible for checking the sign off logs on a weekly basis. Staff will be responsible to check the lint trap at the end of each shift to ensure that they are free of lint, to help reduce the possible risk of a fire.
7. Designated position responsible and specify target date for correction: Maintenance Supervisor, all shift team members, this was immediate and on going

Authorized Signature

Candy Shamo

Date: 8-31-16

Plan of Correction Template

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ADM040

LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

~~Page 4~~

Regulation

162c - Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the residence.

Violation

There were no menus posted in the special care unit of the residence.

Plan of Correction

See Attached Page 3A of 4

Printed Name and Title of Legal Entity Representative (Required on all pages)

Candy Shomo, Executive Director

Signature of Legal Entity Representative (Required on all pages)

Candy Shomo

Date

8-31-16

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PLAN OF CORRECTION

Community Name: Colonial Courtyard at Clearfield

License Number: 447330

Date of Visit: June 10, 2016

Date of Submission: August 31, 2016

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of 4

JE

1. Violation Review: There were no menus posted in the special care unit of the residence
2. Violation Interpretative Statement: 2800 162c- Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the residence
3. Review the benefit of the Regulation, per RCG: Having a menu that is prepared one week in advance and is followed is beneficial for residents so they can plan their meals in advance. For example, if a resident does not like a specific food item, the resident can arrange for in advanced an alternate meal on the day that the food item is served
4. Description of the Repair of the Immediate Problem: Food Service Director immediately placed a menu in the special care unit when the violation was brought to our attention.
5. Determine / document the Root Cause of the Violation: The special care unit was recently opened a few days prior to our 90 day inspection. It was overlooked by the Food Service Director.
6. Detail Action Steps / System Developed to prevent future occurrence: The Food Service Director will be responsible for posting the menu as required by our state regulations. The MC program coordinator will audit her bulletin boards to ensure that all items are posted as required.
7. Designated position responsible and specify target date for correction: Food Service Director and Memory Care Program Coordinator, this was immediate and on going

Authorized Signature



Date: 8-31-16

Plan of Correction Template

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LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

~~Page 1~~

Regulation

183d - Only current prescription, OTC medications, sample and CAM for individuals living in the residence may be kept in the residence.

Violation

A vial of *Novolog*, 100 mL insulin, prescribed for Resident #1, was opened on 5/1/16. The manufacturer's instructions state to discard 28 days after opening.

Plan of Correction

See Attached Page 4A of 4.

Printed Name and Title of Legal Entity Representative (Required on all pages)

Signature of Legal Entity Representative (Required on all pages)

Candy Shomo, Executive Director

Candy Shomo

Date

8-31-16

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PLAN OF CORRECTION

Community Name: Colonial Courtyard at Clearfield

License Number: 447330

Date of Visit: June 10, 2016

Date of Submission: August 31, 2016

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of 4

1. Violation Review: A vial of Novolog, 100ML Insulin, prescribed for Resident #1, was opened on 5/1/16. The manufacturer's instructions state to discard 28 days after opening
2. Violation Interpretative Statement: 2800 183d - Only current prescription, OTC medications, sample and CAM for individuals living in the residence may be kept in the residence
3. Review the benefit of the Regulation, per RCG: Ensures the residence does not keep medications that are for residents no longer living in the residence or that have been discontinued
4. Description of the Repair of the Immediate Problem: The Novolog was immediately discarded per our policy and procedure on medication disposal, by the LPN on duty at the time the violation was noted
5. Determine / document the Root Cause of the Violation: Trained staff failed to discard insulin within 28 days after opening
6. Detail Action Steps / System Developed to prevent future occurrence: The LPN/MA assigned to the 11-7 shift is responsible to audit the carts every 2 weeks. An audit log has been created to ensure that this is being done and will be monitored by the Executive Director, then the DRCS in the near future.
7. Designated position responsible and specify target date for correction: LPN/MA 11-7 shift, Executive Director and DRCS. Immediate and ongoing.

Authorized Signature



Date: 8-31-16

Plan of Correction Template

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