



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: August 17, 2017

Ms. Rebecca Dale, RN, ED
Administrator
Tithonus Clearfield LP
6600 Brooktree Court, Ste. 1000
Wexford, Pennsylvania 15090

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

Dear Ms. Dale:

As a result of the Department of Human Services' licensing inspection on April 10, 2017, 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,

A handwritten signature in black ink that reads "Jason Williams" followed by a stylized flourish or initial.

Jason Williams
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, PA 16830	County: Clearfield
Administrator: Rebecca Dale, RN, ED	
Legal Entity Name: Tithonus Clearfield LP	
Legal Entity Address: 6600 Brooktree Court, Suite 1000, Wexford, PA 15090	
Certificate(s) of Occupancy: I-1, I-2 / 12-28-2015 / Lawrence Township	
Type of Inspection: Partial	
Reason(s) for Inspection(s): Incident	
On-Site Inspections Dates and Department Representatives On-Site: 04-10-2017 – Park, Beth	
Off-Site Inspection Dates and Inspectors, if Applicable: N/A	
Resident Demographic Data as of Inspection Dates	
Licensed Capacity: 74 Number of Residents Served: 45 Secured Dementia Care Unit in Home: Yes Area: First Floor Secured Unit Capacity, if Applicable: 17 Number of Residents Served in Secured Dementia Care Unit, if applicable: 12 Number of Current Hospice Residents: 1 Number of Hospice Residents in past year: 10	Number of Residents who... Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 45 Have Mental Illness: 2 Have an Intellectual Disability: 0 Have a Mobility Need: 26 Have a Physical Disability: 0

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 JUN 02 2017
 WEST REGION FIELD OFFICE
 Human Services Licensing

Rebecca Dale RN ED 6/2/17
Rebecca Dale RN ED

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LICENSING INSPECTION SUMMARY

Assisted Living Residences – 55 Pa.Code § 2800

WEST REGION FIELD OFFICE
Human Services Licensing**Regulation 2800.225(a)**

The administrator or administrator designee, or an LPN, under the supervision of an RN, or an RN shall complete additional written assessments for each resident. A residence may use its own assessment form if it includes the same information as the Department's assessment form. Additional written assessments shall be completed as follows:

- (1) Annually.
- (2) If the condition of the resident significantly changes prior to the annual assessment.
- (3) At the request of the Department upon cause to believe that an update is required.

Violation

Resident #1's assessment dated 8/8/2016, indicates the resident has no problem with irritability, judgment, agitation or aggression. However, caregiver notes, dated November 2016 to April 2017, indicate the resident has displayed problematic behaviors including raising a fist to threaten residents and staff, pushing staff, and inappropriate touching of other residents.

Plan of Correction

See attached page 2^a of 2

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

Rebecca Dale RN ED

Signature of Legal Entity Representative (Required on all pages)

Rebecca Dale RN ED

Date *6/2/17*The above plan of correction is approved as of *8/12/17*
(Date)Plan of correction implementation status as of *8/12/17*
(Date)☐ Fully Implemented☒ Partially Implemented – Adequate Progress *gm*☐ Partially Implemented – Inadequate Progress☐ Not ImplementedThe above plan of correction was approved by *gm*
(Initials)

Rebecca Dale RN ED 6/2/17
Rebecca Dale RN ED

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PLAN OF CORRECTION

WEST REGION FIELD OFFICE
Human Services Licensing

Community Name: Colonial Courtyard at Clearfield

License Number: 447330

Date of Visit: April 10, 2017

Date of Submission: 6/2/17

1. Violation Review: Resident #1's assessment dated 8/8/16 indicates that [REDACTED] has no problem with irritability, judgment, agitation, or aggression. However, caregiver notes dated November 2016 to April 2017 indicate the resident has displayed problematic behaviors including raising a fist to threaten residents and staff, pushing staff, and inappropriate touching of other residents.
2. Violation Interpretative Statement: The residence failed to amend the ASP for one resident who had identified psychological changes.
3. Review the benefit of the Regulation, per RCG: The benefit of this regulation is to allow the residence to create a comprehensive profile of a resident's needs and serves as the basis to meet those needs.
4. Description of the Repair of the Immediate Problem: Resident #1's ASP was amended on 4/7/17 and 6/2/17 to include interventions for judgment, irritability, agitation, and aggression.
5. Determine / document the Root Cause of the Violation: The root cause of the violation was the residences failure to amend the residents ASP dated 8/8/16 when psychological changes in the resident were identified. The residence had knowledge of the resident's behaviors and intervened; however, failed to document preventive interventions on his ASP.
6. Detail Action Steps / System Developed to prevent future occurrence: The Director of Resident Care Services is no longer employed at the community. Other residents with identified issues with judgment, irritability, agitation, and/or aggression will have their ASP reviewed for interventions to address those needs, and amended if necessary. This review will be completed by the Executive Director/designee, and/or Memory Care Program Coordinator by 6/30/17. Staff will be trained to document psychological changes in residents on the community's Daily Communication Log, and Licensed Practical Nurses (under the supervision of a Registered Nurse) and Registered Nurses educated to amend the resident's ASP with interventions to address newly identified psychological changes by 6/30/17. After completion of training and education, Daily Communication Logs will be reviewed weekly by the Executive Director/designee, and/or Memory Care Program Coordinator times four weeks to ensure compliance with documentation of psychological changes in residents.

Authorized Signature



Date:

6/2/17

Plan of Correction Template

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7/11/17

Page 2^a of 2