



pennsylvania
DEPARTMENT OF HUMAN SERVICES

SENT VIA EMAIL: anne.giehl@tapestryseior.com
tpawlina@tapestrycompanies.com

MAILING DATE: June 24, 2020

Ms. Teresa Pawlina
President
Tapestry Companies, LLC
2001 Killebrew Drive, Suite 100
Minneapolis, Minnesota 55425

RE: Tapestry Senior Living Moon Township
550 Cherrington Parkway
Coraopolis, Pennsylvania 15108
License #: 450091

Dear Ms. Pawlina:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on April 20, 2020, of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read "Jason Williams".

Jason Williams
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: TAPESTRY SENIOR LIVING MOON TOWNSHIP
Address: 550 CHERRINGTON PARKWAY, CORAOPOLIS, PA 15108
County: ALLEGHENY Region: WESTERN

License Number: 45009

Administrator

Name: ANNE GIEHL Phone: 4125079999 Email: anne.giehl@tapestryseior.com

Legal Entity

Name: TAPESTRY MOON LLC
Address: 2001 KILLEBREW DRIVE, SUITE 100, BLOOMINGTON, MN, 55425

Certificate(s) of Occupancy

Type: I-1 Date: Issued By:

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 112 Waking Staff: 84

Inspection

Type: Partial BHA Docket #: Notice: Unannounced
Reason: Complaint

Inspection Dates and Department Representative

04/20/2020 - On-Site: Cindy Mulick

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 104 Residents Served: 68

Special Care Unit

In Home: Yes Area: 3rd floor Capacity: 71 Residents Served: 34

Hospice

Current Residents: 4

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 68
Diagnosed with Mental Illness: 1 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 44 Have Physical Disability: 0

161d Special dietary needs

Requirements

2800.

161.d. A resident's special dietary needs as prescribed by a physician, physician's assistant, certified registered nurse practitioner or dietitian shall be met. Documentation of the resident's special dietary needs shall be kept in the resident's record.

Description of Violation

Resident #1's, medical evaluation, dated 11/14/19, indicates the resident is prescribed a mechanical soft diet. However, on 4/20/2020, at approximately 11:53 a.m., the resident was served a regular meal consisting of an uncut sloppy joe sandwich, and a salad containing uncut uncooked broccoli.

Plan of Correction (POC)

On 5/20/20 - An Inservice was provided to clinical and dining staff covering regulation 2800.161.d and variations of diets via the online Relias training module.

JW

The Dietary Director and Resident Services Director will ensure quarterly education is offered to clinical and dietary staff to ensure competency and understanding of the various diets and food consistencies to prevent future occurrences.

The Business Office Director will keep quarterly education certificates on file to ensure compliance.

Legal Entity Representative

[Handwritten Signature]
Signature

Anne Genl, Exec. Director 5/29/20
Printed Name and Title Date

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The above plan of correction is approved as of

6/12/20
(Date)

Plan of correction implementation status as of

6/12/20
(Date)

The above plan of correction was approved by

JW
(Initials)

Implemented
 Not Implemented

224a5 Written initial assessment

Requirements

2800.

- 224.a.5. The written initial assessment must, at a minimum include the following:
 - vi. The individual's need for special diet or meal requirements.

Description of Violation

Resident # 1's assessment, dated 11/13/19, does not include the resident's need for a mechanical soft diet as indicated on the medical evaluation, dated 11/14/19.

Plan of Correction (POC)

On May 31, 2020, chart audits were performed by the Resident Services Director or designee to ensure diet orders are consistent with medical record and kitchen.

The Dietary Director and Resident Services Director will ensure quarterly audits are performed to prevent errors and maintain compliance. The Resident Services Director will also review and discuss the process of alerting dietary staff to diet changes and updating the ASP at the next scheduled staff meeting (June 2020)

Resident #1's assessment was updated to indicate the currently prescribed diet.

JW 6/12/20

Legal Entity Representative

[Signature]
Signature

Anne Giehl, Exec. Director
Printed Name and Title

5/29/20
Date

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The above plan of correction is approved as of 6/12/20 (Date)

Plan of correction implementation status as of 6/12/20 (Date)

Implemented

Not Implemented

The above plan of correction was approved by *JW* (Initials)