

Department of Human Services
Bureau of Human Service Licensing

August 10, 2022

[REDACTED]
TAPESTRY MOON LLC
[REDACTED]
[REDACTED]

RE: TAPESTRY SENIOR LIVING MOON
TOWNSHIP
550 CHERRINGTON PARKWAY
CORAOPOLIS, PA, 15108
LICENSE/COC#: 45009

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/18/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Jon Kimberland

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *TAPESTRY SENIOR LIVING MOON TOWNSHIP* License #: *45009* License Expiration: *05/12/2023*
Address: *550 CHERRINGTON PARKWAY, CORAOPOLIS, PA 15108*
County: *ALLEGHENY* Region: *WESTERN*

Administrator

Name: [REDACTED] Phone: *4125079999* Email: [REDACTED]

Legal Entity

Name: *TAPESTRY MOON LLC*
Address: *2001 KILLEBREW DRIVE, SUITE 100, BLOOMINGTON, MN, 55425*
Phone: *4125079999* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *07/29/2019* Issued By: *Township of Moon*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *124* Waking Staff: *93*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint* Exit Conference Date: *07/18/2022*

Inspection Dates and Department Representative

07/18/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *104* Residents Served: *79*

Special Care Unit

In Home: *Yes* Area: *Units 1,2,3,4* Capacity: *71* Residents Served: *35*

Hospice

Current Residents: *15*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *79*
Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *45* Have Physical Disability: *1*

Inspections / Reviews

07/18/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *08/05/2022*

08/02/2022 - POC Submission

Inspections / Reviews *(continued)*

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *08/05/2022*

08/10/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

185a Storage procedures

1. Requirements

2800.

185.a. The residence 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

On 7/18/22, at approximately 12:30p.m. there was a blue oval caplet on the floor by the med cart across from bedroom #214 in the secured care dementia unit. The medication was given to the med tech on duty. The med tech identified the medication as Tylenol; however, was unable to determine who the medication was prescribed for and properly disposed of the medication.

Plan of Correction

Accept

- 1- Resident Service Director completed in-service with Med techs on 7/20/22 and 7/21/22 on Reg 2800.185a ensuring proper storage of medication while promoting resident safety. Documentation or in service will be kept.
- 2-RSD reviewed the process of medication administration following the 6 rights and 3 checks of the medication administration. this also was part of the in services on 7/20/22 and 7/21/22.
- 3- RSD also in serviced the med techs on the proper storage of medications in the med cart have the proper label and are secure to promote safety of all residents and ensure compliance with reg 185a. This also was part of the in service training on 7/20/22 and 7/21/22. Records of in service will be kept.
- 4- A check list was added to narcotic shift count sheet to ensure all meds are stored properly. Copy of check list will be provided.
- 5- RSD or ARSD will audit check list and carts weekly for 1 month starting 8/15/22 and then quarterly thereafter . Results will be reviewed with Executive Director and records will be kept.
- 6 RSD/ARSD and LPNs will complete a cart audit before 8/19/22 to ensure that all medications are stored safely , and are accessible, secure and ready for distribution and proper use of the medication by the residence staff person. Results of the audit will be reviewed with the ED and records of the audit will be kept.
- 7- The inhouse pharmacy performed a cart audit on 7/7/22 to ensure compliance with reg 2800.185a. Results were reviewed with the ED, RSD and ARSD. Results of audit will be kept.
- 8-The pharmacy will also perform quarterly cart audits to ensure compliance and resident safety. Records of audits will be kept. The next audit is scheduled for 10/13/22.

Completion Date: 08/19/2022

Document Submission

Implemented

- 1- Resident Service Director completed in-service with Med techs on 7/20/22 and 7/21/22 on Reg 2800.185a ensuring proper storage of medication while promoting resident safety. Documentation or in service will be kept.
- 2-RSD reviewed the process of medication administration following the 6 rights and 3 checks of the medication administration. this also was part of the in services on 7/20/22 and 7/21/22.
- 3- RSD also in serviced the med techs on the proper storage of medications in the med cart have the proper label and are secure to promote safety of all residents and ensure compliance with reg 185a. This also was part of the in service training on 7/20/22 and 7/21/22. Records of in service will be kept.
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185a Storage procedures (continued)

- 7- The inhouse pharmacy performed a cart audit on 7/7/22 to ensure compliance with reg 2800.185a. Results were reviewed with the ED, RSD and ARSD. Results of audit will be kept.
- 8-The pharmacy will also perform quarterly cart audits to ensure compliance and resident safety. Records of audits will be kept. The next audit is scheduled for 10/13/22.

please see attached

187d Follow prescriber's orders

1. Requirements

- 2800.
- 187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #1 had a change of medications on 6/24/22 with some medications being discontinued and some medications being changed. Although the pharmacy indicated receiving the physician orders on 6/24/22, the changes did not transfer over to the resident's June 2022 Medication Administration Record (MAR).

The following physician orders were faxed to the pharmacy at 11:51 a.m. on 6/24/22 for resident #1:

- * Discontinue: Ativan 0.5mg tablet (Lorazepam) take one tablet orally two times a day (one at bedtime. 8:00 a.m. and 8:00 p.m.)*
- * Ativan 0.5mg tablet (Lorazepam) take one tab orally every 4 hours as needed*
- * Xanax (Alprazolam) Tab 0.5mg take one tablet by mouth twice daily.*
- * Xanax (Alprazolam) Tab 0.25mg take one tablet by mouth every four hours as needed.*

Resident #1 was administered the following medications after they were discontinued on the following dates and times, to include:

- Ativan 0.5mg: Take one tablet twice a day (one at bedtime) (8:00 a.m. and 8:00 p.m.) and Xanax 0.25mg – Take one tablet twice a day (8:00 a.m. and 8:00 p.m.)*
- * 6/28/22 at 8:00p.m.*
- * 6/29/22 at 8:00 a.m. and 8:00 p.m.*
- * 6/30/22 at 8:00 a.m. and 8:00 p.m.*

Ativan 0.5mg take one tablet twice a day (one at bedtime)

- * 6/24/22 at 10:05 p.m.*
- * 6/25/22 at 8:00 p.m.*
- * 6/26/22 at 8:15 a.m. and 8:00 p.m.*
- * 6/27/22 at 7:55 p.m.*
- * 7/01/22 at 8:36 a.m.*

*Ativan 0.5mg: Take one table every 4 hours as needed.
6/29/22 at 8:50 a.m.*

Plan of Correction

Accept

- 1- RSD in serviced clinical staff on 7/20/22 and 7/21/22 on re 2800.187d- the residence shall follow the direction of the prescriber. records of in service will be kept.*
- 2-RSD in serviced LPNs On 7/8/22 on the process of obtaining and reviewing providers orders. Record of in service*

187d Follow prescriber's orders (continued)

will be kept.

3- A new procedure was put in place for discontinuing medications. Staff will manually discontinue medications in the electronic health record and e-mar. see attached

4-Residence staff will review and monitor daily pending orders to ensure accuracy.

5 RSD/ARSD will review new records weekly for 1 week starting 8/15/22 and quarterly thereafter . Results will be reviewed with the ED and records will be kept.

6-Resident #1 moved out of residence on 7/19/22.

7-Executive Director met with the Ombudsman on 7/6/22 to discuss the family concerns.

Completion Date: 08/19/2022

Document Submission

Implemented

1- RSD in serviced clinical staff on 7/20/22 and 7/21/22 on re 2800.187d- the residence shall follow the direction of the prescriber. records of in service will be kept.

2-RSD in serviced LPNs On 7/8/22 on the process of obtaining and reviewing providers orders. Record of in service will be kept.

3- A new procedure was put in place for discontinuing medications. Staff will manually discontinue medications in the electronic health record and e-mar. see attached

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6-Resident #1 moved out of residence on 7/19/22.

7-Executive Director met with the Ombudsman on 7/6/22 to discuss the family concerns.

see attached