

Department of Human Services
Bureau of Human Service Licensing

April 12, 2021

[REDACTED] PRESIDENT/COO
TITHONUS BUTLER LP
6600 BROOKTREE COURT,SUITE 1000
C/O INTEGRACARE CORP
WEXFORD, PA 15090

RE: NEWHAVEN COURT AT CLEARVIEW
100 NEWHAVEN LANE
BUTLER, PA, 16001
LICENSE/COC#: 42346

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/11/2021, 03/12/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Larry Mazza

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: NEWHAVEN COURT AT CLEARVIEW **Licen e #:** 42346 **Licen e Expiration Date:** 04/25/2021
Address : 100 NEWHAVEN LANE, BUTLER, PA 16001
County: BUTLER **Region:** WESTERN

Administrator

Name: [REDACTED] **Phone:** 7244778713 **Email:** [REDACTED]

Legal Entity

Name: TITHONUS BUTLER LP
Address: 6600 BROOKTREE COURT, SUITE 1000, C/O INTEGRACARE CORP, WEXFORD, PA, 15090
Phone: 7244778713 **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 05/05/1996 **Issued By:** L&I

Staffing Hours

Re ident Support Staff: 0 **Total Daily Staff:** 109 **Waking Staff:** 82

Inspection

Type: Full **Notice:** Unannounced **BHA Docket #:**
Reason: Renewal **Exit Conference Date:** 03/12/2021

Inspection Dates and Department Representative

03/11/2021 - On-Site: [REDACTED]
03/12/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 115 **Residents Served:** 74

Secured Dementia Care Unit

In Home: Yes **Area:** 1st Floor **Capacity:** 18 **Residents Served:** 16

Hospice

Current Re ident : 5

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 69
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 35 **Have Physical Disability:** 0

Inspections / Reviews

03/11/2021 - Full

Lead Inspector: [REDACTED] Follow Up Type: *POC Submission* Follow-Up Date: *03/28/2021*

3/30/2021 POC Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/05/2021*

3/31/2021 - POC Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *04/09/2021*

4/12/2021 - Document Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Not Required*

185a - Implement Storage Procedures**1. 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 #1 is prescribed Albuterol Sulfate HFA 90 mcg Take 2 puffs every 6 hours as needed for wheezing. However, on 3/12/21, this medication was not available in the home.

REPEAT VIOLATION: 8/28/2019, et. al.

185a - Implement Storage Procedures (continued)

Plan of Correction

Accept

1. Description of the Repair of the Immediate Problem:

Resident #1's medication was re-ordered by the home and sent to the Butler VA Pharmacy on 2/4/21, 3/1/21, and 3/11/21. The medication was on-site on 3/22/21.

2. Determine / Document the Root Cause of the Violation:

Resident #1 did not come to the home with this medication upon admission.

3. Detail Action Steps / System Developed to prevent future occurrence:**a. Teaching or Training**

Sales & Marketing will ensure that new residents and responsible parties are well informed upon admission regarding the home's Pharmacy policy per the Residency Agreement that states:

PHARMACY

Community has entered into a contract agreement with a pharmacy which will provide medications and necessary documentation in a manner consistent with Community's pharmacy policy. This pharmacy is the primary supplier of medications and pharmaceutical supplies to Community. However, if the Resident prefers the use of another pharmacy for prescription medication, the pharmacy of the Resident's choice must be able to supply medications and services in accordance with the system utilized by the Community's contract pharmacy so the medication management system remains intact. Community medication packaging method is the "Blister Bingo Card Packaging" System (with the exception of medications supplied by the VA Pharmacy). Any and all medications ordered by a physician for the Resident must be available at the Community at all times. The Community reserves the right to obtain medications from the contracted pharmacy, at a cost to the Resident, the Responsible Party and/or the Guarantor, should it be discovered that a prescribed medication is not on site. **The home will continue to honor and accept medications supplied and packaged from the VA Pharmacy. However, if the VA Pharmacy is not able to supply prescribed medications in a timely manner, the home will secure the medication from the contract Pharmacy at the cost of the resident.** _

The Resident Wellness Director (RWD) or designee will provide re-education on the requirements of 2600.185.a. to all LPN's & Medication Associates as it relates to prescribed medications not available in the home. Additionally, education on this policy will be provided to current residents and responsible parties who utilize the VA Pharmacy. Target date is 4/9/21.

b. On-going Monitoring

To establish the extent of compliance, all medications provided by pharmacies outside the home's contract agreement, including the Butler VA Pharmacy, will be audited for availability and for the condition identified on the visit relating to 2600.185.a. A medication audit has been added to the home's electronic medication record system to inventory VA medication availability in the home. All discrepancies will be documented and corrected. The audit will occur weekly on Tuesdays, starting on 3/30/21.

4. Designated position responsible and specify target date for correction.

The RWD or designee will oversee the audit of the medications related to residents that use pharmacies outside the home's contract agreement, including the Butler VA Pharmacy for compliance with 2600.185.a.

The RWD or designee will work with residents, responsible parties, and related pharmacies as necessary to ensure prescribed medications are available in the home as ordered and brought into compliance, by 4/9/21.

185a - Implement Storage Procedures (*continued*)

Document Submission

Implemented

Trainings/Education documentation Attached

187d - Follow Prescriber's Orders

1. Requirements

2600.

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

Description of Violation

Resident #1 is prescribed Co-Enzyme Q 10mg–Take 1 tablet by mouth daily. This medication was not administered from 3/2/21 through 3/11/21, because it was not available in the home

Resident #1 is prescribed Quetiapine Fumarate 100 mg–Take ½ tablet by mouth 2 times daily. This medication was not administered from 7:00 PM on 3/9/21 through 9:00 AM on 3/12/21, because it was not available in the home.

Resident #2 is prescribed Ferrous Sulfate 325 mg–Take 1 tablet with breakfast. This medication was not administered from 3/5/21 through 3/12/21, because it was not available in the home.

Resident #3 is prescribed Humalog 100U/ml–Inject subcutaneously 3 times daily in accordance to the following sliding scale: 141–180=1U; 181–220=2U; 221–260=3U; 261–300=4U; 301–340=5U; >340=6U.

According to the resident's glucometer, the resident's blood glucose was 237 at 8:00 AM on 3/5/21 and should have received 3 units of insulin; however, the resident received 4 units of insulin according to the resident's March 2021 medication administration record.

REPEAT VIOLATION: 8/28/2019, et. al.

187d - Follow Prescriber's Orders (continued)

Plan of Correction

Accept

1. Description of the Repair of the Immediate Problem:

Resident #1's Co-Enzyme medication was re-ordered by the home and sent to the Butler VA Pharmacy on 2/8/21 and 2/23/21. The order was sent to the home's in-house pharmacy and the home was informed on 2/23/21 that the dosage was not available. An order to discontinue the medication was sent to Resident #1's physician on 3/4/21 & 3/12/21. The signed order to discontinue the medication was received on 3/16/21.

Resident #1's Quetiapine Fumarate medication was re-ordered by the home and sent to the Butler VA Pharmacy on 3/9/21 and 3/11/21. The order was sent to the home's in-house pharmacy on 3/9/21 and was on-site on 3/16/21.

Resident #2's medication was re-ordered by the home and sent to Resident #2's physician on 3/5/21, a phone call placed by the home's pharmacy to the physician on 3/5/21, a second phone call placed to the physician on 3/9/21. The medication was on-site on 3/22/21.

Resident #3 - there is no repair of the immediate problem.

2. Determine / Document the Root Cause of the Violation:

The home did not ensure that all prescribed medications were available in the home.

3. Detail Action Steps / System Developed to prevent future occurrence:*a. Teaching or Training*

Re: Medications Not Available in the Home:

Sales & Marketing will ensure that new residents and responsible parties are well informed upon admission regarding the home's Pharmacy policy per the Residency Agreement that states:

PHARMACY

Community has entered into a contract agreement with a pharmacy which will provide medications and necessary documentation in a manner consistent with Community's pharmacy policy. This pharmacy is the primary supplier of medications and pharmaceutical supplies to Community. However, if the Resident prefers the use of another pharmacy for prescription medication, the pharmacy of the Resident's choice must be able to supply medications and services in accordance with the system utilized by the Community's contract pharmacy so the medication management system remains intact. Community medication packaging method is the "Blister Bingo Card Packaging" System (with the exception of medications supplied by the VA Pharmacy). Any and all medications ordered by a physician for the Resident must be available at the Community at all times. The Community reserves the right to obtain medications from the contracted pharmacy, at a cost to the Resident, the Responsible Party and/or the Guarantor, should it be discovered that a prescribed medication is not on site. **The home will continue to honor and accept medications supplied and packaged from the VA Pharmacy. However, if the VA Pharmacy is not able to supply prescribed medications in a timely manner, the home will secure the medication from the contract Pharmacy at the cost of the resident.**

The Resident Wellness Director (RWD) or designee will provide re-education on the requirements of 2600.187.d. to all LPN's & Medication Associates as it relates to prescribed medications not available in the home. Additionally, education on this policy will be provided to current residents and responsible parties who utilize the VA Pharmacy. Target date is 4/9/21.

Re: Insulin & Diabetic Medication Administration:

The Senior Wellness & Operations Specialist will provide remediation training on Diabetic Management and Medication administration related to diabetes and insulin to Medication Associates by 4/9/21.

b. On-going Monitoring

Re: Medications Not Available in the Home:

To establish the extent of compliance, all medications provided by pharmacies outside the home's contract agreement, including the Butler VA Pharmacy, will be audited for availability and for the condition identified on the visit relating to 2600.187.d. A medication audit has been added to the home's electronic medication record system to inventory VA medication availability in the home. All discrepancies will be documented and corrected. The audit will occur weekly on Tuesdays, starting on 3/30/21.

Re: Insulin & Diabetic Medication Administration:

To establish the extent of compliance, all sliding scale orders will be audited for accuracy and consistency with the MAR for the condition identified on the visit relating to 2600.187.d. Any discrepancies will be documented and corrected. Target date is 4/9/21.

4. Designated position responsible and specify target date for correction.

The RWD or designee will oversee the audit of the medications related to residents that use pharmacies outside the home's contract agreement, including the Butler VA Pharmacy for compliance with 2600.187.d.

The RWD or designee will work with residents, responsible parties, and related pharmacies as necessary to ensure prescribed medications are available in the home as ordered and brought into compliance, by 4/9/21.

The RWD will oversee the audit of the of sliding scale orders for compliance with 2600.187.d. A record of the audit will be maintained.

The Executive Operations Officer will verify that the verification is on-going and will be reminded by Outlook calendar Tickler for next 60 days to establish the habit and routine of the RWD or designee.

Completion Date: 03/30/2021

187d - Follow Prescriber's Orders *(continued)***Document Submission****Implemented***Trainings/Education documentation attached*