



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAY 27 2016

Mr. Harry Yoder, Administrator
Jai Jalaram Care LP
2015 North Reading Road
Denver, Pennsylvania 17517


RE: Colonial Lodge Retirement Community
License #: 322580

Dear Mr. Yoder:

As a result of the Department of Human Services' annual licensing inspections on February 9, 2016 and February 10, 2016 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) 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. 2600 must be maintained.

Sincerely,


Jay Bausch
Deputy Secretary

Enclosure
License Inspection Summary

Violation Report: 32258 - 02/09/2016 - McCloskey, Jason
 PCH Name: COLONIAL LODGE RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600
 2600.88(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

The ceiling in the hallway between bedrooms 136 and 138 has loose, crumbling plaster which feels damp. The plaster surrounds a plumbing access panel. The paint on the access panel is crumbling and flaking. There is a previous attempt to repair the ceiling area as evidenced by a straight-edged panel attached to the ceiling which is covered with plaster repair material. The straight edge droops down from the rest of the ceiling and moves up and down about a 1/4".

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Loose crumbling plaster on ceiling will be replaced and access panel will be scraped and painted by maintenance staff. Completion date set for March 31, 2016. The administrator will ensure that maintenance is monthly checking/inspecting ceilings as per maintenance checklist.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Harry Joder*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Harry Joder Administrator</i>	Date <i>3/4/16</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 3/9/16
 (Date)

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

Plan of correction implementation status as of 5/16/16
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 32258 - 02/09/2016 - McCloskey, Jason
 PCH Name: COLONIAL LODGE RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600
 2600.89(b) - Hot water temperature in areas accessible to the resident may not exceed 120°F.

2a. DESCRIPTION OF VIOLATION
 On 2-10-16, at approximately 9:30am, the following hot water temperatures were recorded:
 - the bathroom sink in bedroom 117 measured 131 degrees Fahrenheit
 - the bathroom sink in bedroom 118 measured 130 degrees Fahrenheit
 - the bathroom sink in bedroom 127 measured 123 degrees Fahrenheit

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Maintenance is currently checking hot water temperatures and will install new mixing valves by March 1st. Housekeeping staff will continue monitoring temperatures weekly as has been their past assignment. Administrator will ensure that temperatures do not exceed 120°.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Harry Joder*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Harry Joder Administrator* Date *3/4/16*

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

The above plan of correction is approved as of <u>3/9/16</u> (Date)	Plan of correction implementation status as of <u>3/16/16</u> (Date)
The above plan of correction was approved by <u>BMS</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 32258 - 02/09/2016 - McCloskey, Jason
 PCH Name: COLONIAL LODGE RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600
 2600.94(b) - Interior stairs, exterior steps and ramps must have nonskid surfaces.

2a. DESCRIPTION OF VIOLATION

The wood exterior porch and steps leading from bedrooms 203 and 207 lack non-skid surfaces.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Non-skid surfaces will be applied to exterior steps of bedroom 203 and 207 by maintenance staff as soon as weather permits. The administrator will ensure that regular checks are conducted by maintenance as part of their monthly maintenance checklist.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Harry Yoder*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Harry Yoder, Administrator</i>	Date <i>3/4/16</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 3/9/16
 (Date)

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

Plan of correction implementation status as of 5/16/16
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 32258 - 02/09/2016 - McCloskey, Jason
 PCH Name: COLONIAL LODGE RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600
 2600.100(a) - The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

The bottom step of the wood stairs leading from bedroom 207 is cracked. The front edge of the step, measuring about 2", pivots along the length of the crack when weight is applied and poses a tripping and falling hazard to anyone using the steps.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The bottom step of the wood stairs will be replaced by maintenance by March 31, 2016 or sooner weather permitting. Exterior deck and stair will be added to the monthly checklist completed by maintenance. The administrator will follow-up to ensure that maintenance staff is complying.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Harry Yoder*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Harry Yoder Administrator</i>	Date <i>3/4/16</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>3/19/16</u> (Date)	Plan of correction implementation status as of <u>5/16/16</u> (Date)
The above plan of correction was approved by <u>BMS</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 32258 - 02/09/2016 - McCloskey, Jason
 PCH Name: COLONIAL LODGE RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600
 2600.101(j)(7) - Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on at bedside.

2a. DESCRIPTION OF VIOLATION

The beds in rooms 117 and 118 do not have a source of light that can be turned on/off from the bedside.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Bedside lamps in Rm 117 and 118 were moved next to the bed on 2/18/16. Hs King staff will include as part of their daily assignment checklist to make sure all residents have a lamp by their bed. Assistant Administrator will ensure that all residents have a bedside lamp close to their bed.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Harry Yoder*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Harry Yoder Administrator</i>	Date <i>3/4/16</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>3/9/16</u> (Date)	Plan of correction implementation status as of <u>3/9/16</u> (Date)
The above plan of correction was approved by <u><i>BY</i></u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 32258 - 02/09/2016 - McCloskey, Jason
 PCH Name: COLONIAL LODGE RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600

2600.103(f) - Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

2a. DESCRIPTION OF VIOLATION

The household refrigerator in the west lounge did not have thermometers in the refrigerator or freezer.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Refrigerator was removed from the west lounge on 2/18/16. Administrator will ensure that a thermometer is in refrigerator or freezer if a refrigerator is ever placed in west lounge in the future.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Harry Gader

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Harry Gader Administrator

Date *3/4/16*

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The above plan of correction is approved as of 3/9/16
 (Date)

Plan of correction implementation status as of 3/9/16
 (Date)

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

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 32258 - 02/09/2016 - McCloskey, Jason
 PCH Name: COLONIAL LODGE RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600
 2600.105(g)(1) - To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.

2a. DESCRIPTION OF VIOLATION
 On 2-10-16, there was a heavy accumulation of lint in the lint trap of the commercial dryer on the right side of the laundry room.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Staff person in laundry received written warning on 2/10/16 concerning not removing lint. A large sign is already on the dryer stating to clean lint filter after each use. Staff also signs a 3 ring binder daily that they cleaned the filter. Administrator will make daily checks to see if staff are following policy.

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page) *Harry Yoder*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Harry Yoder Administrator* Date *3/4/16*

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

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The above plan of correction was approved by <u>BAS</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 32258 - 02/09/2016 - McCloskey, Jason
 PCH Name: COLONIAL LODGE RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600
 2600.132(h) - Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

2a. DESCRIPTION OF VIOLATION

During fire drills held on 5-29-15, 9-29-15 and 10-30-15, all residents did not evacuate to designated fire safe areas.

- On 5-29, 64 residents were present but only 63 evacuated
- On 9-29, 68 residents were present but only 67 evacuated
- On 10-30, 68 residents were present but only 67 evacuated

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

As of 2/10/16 all residents will be evacuated to designated fire safe area during fire drills. Fire drill on 2/22/16 and all residents were evacuated. Staff were notified on 2/10/16 of the evacuation policy and will receive a written memo as well on 2/24/16.

The home shall establish a written policy and procedure that describes how the home will conduct fire drills with residents who are receiving hospice services and actively dying. This shall follow all the procedures described in the Statement of Policy 29a through 29a-b11.

Staff shall receive training in this Policy and Procedures and documentation of this training shall be kept by the home.

The status of Residents receiving Hospice services will be reviewed weekly to identify those residents that will not be evacuated during a fire drill, and implementation of the Policy can be initiated.

BAS 3/9/16

Repeat Violation: Yes	Date(s) of Previous Violation(s):	01/28/2015	
Signature of Legal Entity Representative (Required on EVERY Page) <i>Harry Clader</i>			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Harry Clader Administrator</i>			Date <i>3/14/16</i>
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!			
The above plan of correction is approved as of <u>3/9/16</u> (Date)		Plan of correction implementation status as of <u>5/16/16</u> (Date)	
The above plan of correction was approved by <u>BAS</u> (Initials)		<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented	

Violation Report: 32258 - 02/09/2016 - McCloskey, Jason
 PCH Name: COLONIAL LODGE RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600

2600.187(a) - A medication record shall be kept to include the following for each resident for whom medications are administered:

- (1) Resident's name.
- (2) Drug allergies.
- (3) Name of medication.
- (4) Strength.
- (5) Dosage form.
- (6) Dose.
- (7) Route of administration.
- (8) Frequency of administration.
- (9) Administration times.
- (10) Duration of therapy, if applicable.
- (11) Special precautions, if applicable.
- (12) Diagnosis or purpose for the medication, including pro re nata (PRN).
- (13) Date and time of medication administration.
- (14) Name and initials of the staff person administering the medication.

2a. DESCRIPTION OF VIOLATION

The medication administration record for Resident 1 does not include the diagnosis or purpose for *Prednisone 5 mg, take one tablet by mouth daily.*

The medication administration record for Resident 2 does not include the diagnosis or purpose for *Symbicort, 160 / 4.5 mcg, take 2 puffs by mouth twice daily.*

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

As of 2/10/16 the medication administration record for Resident 1 does include the diagnosis or purpose for Prednisone 5 mg, take one tablet by mouth daily.

As of 2/10/16 the medication administration record for Resident 2 does include the diagnosis or purpose for Symbicort, 160/4.5 mcg, take 2 puffs by mouth twice daily.

The nursing supervisor will ensure that the diagnosis or purpose is always listed for every med on the MARs, going forward.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	01/28/2015		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Harry Jordan*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Harry Jordan Administrator* Date *3/4/16*

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

The above plan of correction is approved as of 3/9/16
 (Date)

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

Plan of correction implementation status as of 3/9/16
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented