



SEP 22 2017

Ms. Christine Horn,
Managing Director
Columbia Cottage – Hershey, LLC
103 North Larkspur Drive
Palmyra, Pennsylvania 17078

RE: Columbia Cottage – Hershey, LLC
License #: 330240

Dear Ms. Horn:

As a result of the Department of Human Services' annual licensing inspection on February 8, 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink that reads "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
Licensing Inspection Summary

LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

Name: Columbia Cottage - Hershey LLC	License Number: 330240
Address: 103 North Larkspur Drive Palmyra, Pennsylvania 17078	County: Lebanon
Administrator: Christine Horn	
Legal Entity Name: Same	
Legal Entity Address: Same	
Certificate(s) of Occupancy: C2, LP (L&I) 7/11/2000	
Type of Inspection: Full	
Reason(s) for Inspection(s): Renewal	
On-Site Inspections Dates and Department Representatives On-Site: February 8, 2017 Denise Gillespie and Laura Heemer	
Off-Site Inspection Dates and Inspectors, if Applicable: NA	
Resident Demographic Data as of Inspection Dates	
Licensed Capacity: 60 Number of Residents Served: 52 Secured Dementia Care Unit in Home: No Area: NA Secured Unit Capacity, if Applicable: NA Number of Residents Served in Secured Dementia Care Unit, if applicable: NA Number of Current Hospice Residents: 4 Number of Hospice Residents in past year: 10	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 52 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 12 Have a Physical Disability: 2

LICENSING INSPECTION SUMMARY

Assisted Living Residences – 55 Pa.Code § 2800

Regulation

§ 2800.65. Staff orientation and direct care staff person training and orientation.

(i) Training topics for the annual training for direct care staff persons must include the following:

- (1) Medication self-administration training.
- (2) Instruction on meeting the needs of the residents as described in the assessment tool, medical evaluation and support plan.
- (3) Care for residents with dementia, cognitive and neurological impairments.
- (4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
- (5) Assisted living service needs of the resident.
- (6) Safe management techniques.
- (7) Care for residents with mental illness or an intellectual disability, or both, if the population is served in the residence.

Violation

Staff Member A did not receive training in Medication Self-Administration during the training year from 10/22/15 to 10/22/16.

Plan of Correction

As was discussed at the time of inspection, we recognized the oversight of Medication Administration Training. In an effort to demonstrate forthcoming compliance, the training calendar was shared with Ms. Heemer, Ms. Gillespie and Ms. Page. Medication Self Administration training is scheduled for November 15, 2017, and will be scheduled annually thereafter. This will be reflected on the training calendar and evidenced on the sign in sheet for the scheduled training.

Additionally, in conversation with our Inspectors and Ms. Page, it is best practice to have the training calendar coincide with the yearly calendar as opposed to the start date of the employee. In an effort to improve our practice we will convert our training year to coincide with the yearly calendar.

Christine Horn, Managing Director

Signature of Legal Entity Representative (Required on all pages)

Christine Horn

Date

03/30/2017

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

The above plan of correction is approved as of 8-08-17
(Date)

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

Plan of correction implementation status as of 8-08-17
(Date)

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

LICENSING INSPECTION SUMMARY

Assisted Living Residences – 55 Pa.Code § 2800

Regulation: § 2800.132. Fire drills.

(g) Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

Violation:

None of the residence's fire drills conducted during 2016 were held between the hours of 4:00 pm and 5:00 am.

Plan of Correction

Subsequent to our inspection, in an effort to demonstrate compliance and improved practice, fire drills have been conducted as following at Columbia Cottage Hershey:

- Friday, March 31, 2017 at 10:10am
- Thursday, April 20, 2017 at 11:27pm
- Wednesday May 24, 2017 at 5:59pm
- Tuesday June 20, 2017 at 11:32am
- Friday July 21, 2017 at 5:03am

The Managing Director(Administrator) will continue to monitor the fire drill log each quarter to ensure drills are completed on different days of the week and at different times of the day and night.

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

Christine Horn

Signature of Legal Entity Representative (Required on all pages)

Christine Horn

Date

08-08-17

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The above plan of correction is approved as of 8-08-17
(Date)

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

Plan of correction implementation status as of 8-08-17:
(Date)

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- Partially Implemented – Adequate Progress
- Partially Implemented – Inadequate Progress
- Not Implemented