



pennsylvania
DEPARTMENT OF HUMAN SERVICES

AUG 30 2017

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 22, 2017 and February 23, 2017 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.

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, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

Violation Report: 32258 - 02/22/2017 - Comstock, Kelly
 PCH Name: COLONIAL LODGE RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600

2600.20(b)(6) - If a home is holding more than \$200 for a resident for more than two consecutive months, the administrator shall notify the resident and offer assistance in establishing an interest-bearing account in the resident's name at a local Federally-insured financial institution. This does not include security deposits.

2a. DESCRIPTION OF VIOLATION

Resident #2's account balance in the home is \$260.00. Resident #5's account balance is \$465.50. The home has not offered the residents assistance in establishing an interest-bearing account for the funds in excess of \$200.

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.

Resident #2 and Resident #5 were offered an interest bearing account and signed their resident account fund waiving the account setup. Going forward residents waiving the account will be required to sign the waiver prior to the \$200 mark. The office staff/resident funds manager will daily monitor the residents fund accounts to avoid further incidents. See attachment D and E.

RECEIVED

CENTRAL ADMINISTRATION OFFICE

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

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|--|-----------------------|
| Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Harry Yoder Administrator</i> | Date <i>5/4/17</i> |
|--|-----------------------|

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

The above plan of correction is approved as of 6-30-17
 (Date)

Plan of correction implementation status as of 6-30-17
 (Date)

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

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

Violation Report: 32258 - 02/22/2017 - Comstock, Kelly
 PCH Name: COLONIAL LODGE RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600
 2600.85(a) - Sanitary conditions shall be maintained.

2a. DESCRIPTION OF VIOLATION
 Resident #4 has blood sugar readings taken twice a day (AM/PM). The assigned glucometer for Resident #4 only recorded his/her evening readings. On 2/21/17, the morning reading for Resident #4 recorded on the medication administration record was found on Resident #3's glucometer.

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 6/19/17 the Director of Nursing shall audit the actual readings on a resident's glucometer as compared with the documented readings on the resident MAR. A 10% sample will be audited and documented on a weekly basis.

The resident's glucometer log will be kept with the residents MAR in the same book.

The Director of Nursing will observe all staff responsible for diabetes performing blood glucose checks including glucometer use, glucose log and MAR at a minimum of 2 times per year; preferably at the time of their semi and annual practicums. These observations will be documented.

A refresher staff training for all staff responsible for blood sugar testing will be conducted by Wellspan Hospital by 7/10/17.

Medication policies have been reviewed and updated by the administration and include a new policy concerning glucometers.

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

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|---|-----------------------|
| Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Harry Zesler Administrator</i> | Date <i>5/4/17</i> |
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 (Date)

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

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 (Date)

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- Not Implemented

Violation Report: 32258 - 02/22/2017 - Comstock, Kelly
 PCH Name: COLONIAL LODGE RETIREMENT COMMUNITY

1. REGULATION 55 Pa. Code §2800
 2600.102(d)(1) - Toilet and bath areas must have grab bars, hand rails or assist bars.

2a. DESCRIPTION OF VIOLATION

There is no grab bar, hand rail or assist bar next to the toilet in the bathroom of Bedroom #130 or the shower of Bedroom #203.

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

Includes 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.

A grab bar was installed next to the toilet in the bathroom of bedroom #130 and in the shower of #203 on 3/21/17. All resident room bathrooms are being checked for grab bars as is required, by maintenance staff.

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

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| Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Harry Yoder Administrator</i> | Date <i>5/2/17</i> |
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| The above plan of correction was approved by <u>BE</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 - 02/22/2017 - Comstock, Kelly
 PCH Name: COLONIAL LODGE RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600

2600.132(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.

2a. DESCRIPTION OF VIOLATION

Fire drills were conducted during sleeping hours on 4/20/16 and 10/18/16. According to the home's fire drill records, the number of staff persons participating in the drills on the specified dates were six and eight, respectively. According to the home's staffing records, the average number of staff persons typically on duty during these hours is only two.

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.

A fire drill was conducted during sleeping hours on 4/19/17 at 6:19 am. Administrator will meet with staff and residents prior to the next fire drill to review the intent of the regulation to not hold fire drills when additional staff persons are present. Another overnight drill will be conducted by July 7th, which will only include staff which are routinely on duty at the said hour. A copy of the drill will be emailed separately to the Department.

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| 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) *Harry Yoder Administrator* Date *5/4/17*

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| The above plan of correction was approved by <u>AE</u> (Initials) | |

Violation Report: 32258 - 02/22/2017 - Comstock, Kelly
 PCH Name: COLONIAL LODGE RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600

2600.141(a)(1) - A resident shall have a medical evaluation by a physician, physician's assistant, or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission.

2a. DESCRIPTION OF VIOLATION

Resident #1 was admitted on [REDACTED] A medical evaluation was completed on 3/16/18, more than 60 days prior to the resident's admission.

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.

All resident medical evaluations will be completed no more than the 60 day requirement prior to admission. The Assistant Director of Nursing is responsible to monitor all DME's before and after admission. The Assistant Administrator will double check all resident DME's for completion and accuracy.

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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) *Harry Yoder* Date *5/4/17*

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Violation Report: 32258 - 02/22/2017 - Comstock, Kelly
 PCH Name: COLONIAL LODGE RETIREMENT COMMUNITY

1. REGULATION 55 Pa. Code §2600

2600.171(b)(5) - If staff persons or volunteers of the home provide transportation for the residents, the vehicle must have a first aid kit with the contents in § 2600.96 (relating to first aid kit).

2a. DESCRIPTION OF VIOLATION

The 2006 Kia Sedona, used for transporting residents, has a first aid kit that does not include protective eye coverings or a breathing shield.

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.

On 2/24/17 the Office Staff/Transportation Coordinator replaced the eye covering and breathing shield in the first aid kit which had fallen out of the kit and was laying in the van. The staff person already consistently uses a first aid kit monthly check list and will continue to do so. See Attachment F

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

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| Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Harry Goster Administrator</i> | Date <i>5/4/17</i> |
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 (Initials)

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