



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: December 14, 2017

Mr. W. Bryan Hudson,
EVP/ General Counsel and Secretary
Columbia/Wegman Collegeville, LLC
ATTN: LEGAL DEPT.
300 East Market Street, Suite 100
Louisville, Kentucky 40202

RE: The Landing of Collegeville
1421 South Collegeville Road
Collegeville, Pennsylvania 19426
License #: 142610

Dear Mr. Hudson:

As a result of the Department of Human Services' licensing inspection on October 27, 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.

Sincerely,

A handwritten signature in cursive script that reads "Roslyn Brewer/DK".

Roslyn Brewer
Regional Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report: 14261 - 11/27/2017 - Kazimer, Lauren
 PCH Name: THE LANDING OF COLLEGEVILLE

1. REGULATION 55 Pa.Code §2600
 2600.42(b) - A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

2a. DESCRIPTION OF VIOLATION

Staff person A stole an unactivated credit card from resident #1's bedroom. On 10/9, staff person A activated resident #1's credit card and made five purchases with the card between 10/10 and 10/14. Several more purchases were attempted before the card was declined. Resident #1's POA contacted the police on 10/17 regarding the fraudulent activity. On 10/24, the police arrested staff person A, and the staff eventually confessed to the theft of the credit card from the resident's 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.

The Landing of Collegeville submits this Plan of Correction to comply with the state regulatory provisions. The preparation and submission of this Plan of Correction does not constitute an admission of fault or liability on the part of The Landing of Collegeville or an agreement by The Landing of Collegeville regarding the truth or accuracy of the facts alleged or conclusions drawn.

The Executive Director and all staff reviewed regulation 2600.42(b).

1. When the community became aware of the above mentioned situation on 10/22/17, the community immediately notified the Area Agency on Aging and this employee was immediately suspended pending the outcome of the investigation.
2. On the morning of 10/24/17, the community assisted local law enforcement so they could arrest this employee.
3. On the afternoon of 10/24/17, the community was informed by local law enforcement that this employee admitted to the theft so her employment with us was terminated that same day.
4. After becoming aware of the above situation, all staff was retrained on Resident Rights and our Abuse Policy and the community spoke with all residents regarding safeguarding their belongings.

Throughout the process, the community worked with Aging and Adult Services, DHS, the Ombudsman, local law enforcement, the resident and her [redacted] POA.

The Executive Director or designee will ensure compliance with regulation 2600.42(b).

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative <i>(Required on EVERY Page)</i>	<i>Monique Carter, RN, PCHA</i>
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Printed Name and Title of Legal Entity Representative <i>(Required on EVERY Page)</i>	Date
<i>Monique Carter, RN, PCHA</i>	<i>11/28/17</i>

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

The above plan of correction is approved as of 12/4/17
 (Date)

Plan of correction implementation status as of 12/7/17
 (Date)

The above plan of correction was approved by [Signature]
 (Initials)

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