



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**MAY 23 2018**

Ms. Merri C. Ney,  
Managing Director  
Columbia Cottage Wyomissing, LLC  
3121 State Hill Road  
Wyomissing, Pennsylvania 19610

RE: Columbia Cottage Wyomissing, LLC  
License #224640

Dear Ms. Ney:

As a result of the Department of Human Services' annual licensing inspection on March 14, 2018 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](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,

Jacqueline L. Rowe  
Director

Enclosure  
Licensing Inspection Summary

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

<b>ALR Name:</b> COLUMBIA COTTAGE WYOMISSING , LLC	<b>License Number:</b> 224640
<b>Address:</b> 3121 STATE HILL ROAD WYOMISSING PA 19610	<b>County:</b> BERKS
<b>Administrator:</b> MERRI NEY	
<b>Legal Entity Name:</b> COLUMBIA COTTAGE WYOMISSING LLC	
<b>Legal Entity Address:</b> 3121 STATE HILLE ROAD WYOMISSING PA 19610	
<b>Certificate(s) of Occupancy:</b> C2 LP 10/24/97	
<b>Type of Inspection:</b> Full	
<b>Reason(s) for Inspection(s):</b> Renewal Inspection	
<b>On-Site Inspections Dates and Department Representatives On-Site:</b> 3/14/18 GERALD DUMAS, AMY DELUCA	
<b>Off-Site Inspection Dates and Inspectors, if Applicable:</b>	
<b>Resident Demographic Data as of Inspection Dates</b>	
<p><b>Licensed Capacity:</b> 50</p> <p><b>Number of Residents Served:</b> 44</p> <p><b>Secured Dementia Care Unit in Home:</b> N.A.</p> <p><b>Area:</b> N.A.</p> <p><b>Secured Unit Capacity, if Applicable</b></p> <p><b>Number of Residents Served in Secured Dementia Care Unit, if applicable:</b> 0</p> <p><b>Number of Current Hospice Residents:</b> 7</p> <p><b>Number of Hospice Residents in past year:</b> 17</p>	<p><b>Number of Residents who:</b></p> <p><b>Receive Supplemental Security Income:</b> 0</p> <p><b>Are 60 Years of Age or Older:</b> 44</p> <p><b>Have Mental Illness:</b> 0</p> <p><b>Have an Intellectual Disability:</b> 0</p> <p><b>Have a Mobility Need:</b> 28</p> <p><b>Have a Physical Disability:</b> 0</p>

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

**Regulation**  
**183f**

Prescription medications, OTC medications and CAM that are discontinued, expired or for residents who are no longer served at the residence shall be destroyed in a safe manner according to the Department of Environmental Protection and Federal and State regulations. When a resident permanently leaves the residence, the resident's medications shall be given to the resident, the designated person, if any, or the entity taking responsibility for the new placement on the day of departure from the residence.

**Violation**

On 3/14/18, the day of the Inspection, a narcotic medication card for resident # 1 contained 45 Oxycodone pills (5 mg tablets take ½ tablet by mouth every 4 to 6 hours as needed for moderate to severe pain), was found in the narcotic drawer. The prescription had expired on 3/6/18.

**Plan of Correction**

Subsequent to this incident, the Cottage conducted supplemental training for all med techs, and nurses on proper storage, destruction and handling of narcotics. (see Attached-Staff sign in sheet)

In an effort to prevent incidents of this nature, the Resident Wellness Director will audit each residents medications monthly, and the Narcotics twice each month.

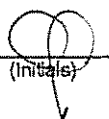
All med techs will continue to be trained yearly, and have 1:1 observation, and MAR reviews twice each year with the Resident Service Director to maintain their med tech status.

Printed Name and Title of Legal Entity Representative (Required on all pages) Merri C. Noy, Managing Director

Signature of Legal Entity Representative (Required on all pages) Merri C. Noy Date 4/9/18

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

The above plan of correction is approved as of 4-13-18  
 (Date)

The above plan of correction was approved by   
 (Initials)

Plan of correction implementation status as of 4/24/18  
 (Date)

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