

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC

July 8, 2024

[REDACTED], ADMINISTRATOR
COLUMBIA COTTAGE WYOMISSING LLC
3121 STATE HILL ROAD
WYOMISSING,, PA, 19610

RE: COLUMBIA COTTAGE WYOMISSING,
LLC
3121 STATE HILL ROAD
WYOMISSING, PA, 19610
LICENSE/COC#: 22464

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/11/2024 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,

[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: COLUMBIA COTTAGE WYOMISSING, LLC License #: 22464 License Expiration: 05/15/2025
Address: 3121 STATE HILL ROAD, WYOMISSING, PA 19610
County: BERKS Region: NORTHEAST

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: COLUMBIA COTTAGE WYOMISSING LLC
Address: 3121 STATE HILL ROAD, WYOMISSING,, PA, 19610
Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Type: C-2 LP Date: 10/29/1996 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 64 Waking Staff: 48

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
Reason: Renewal Exit Conference Date: 06/11/2024

Inspection Dates and Department Representative

06/11/2024 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information			
License Capacity: 50		Residents Served: 36	
Special Care Unit			
In Home: No	Area:	Capacity:	Residents Served:
Hospice			
Current Residents: 3			
Number of Residents Who:			
Receive Supplemental Security Income: 0		Are 60 Years of Age or Older: 36	
Diagnosed with Mental Illness: 0		Diagnosed with Intellectual Disability: 0	
Have Mobility Need: 28		Have Physical Disability: 1	

Inspections / Reviews

06/11/2024 - Full
Lead Inspector: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 06/30/2024

07/01/2024 - POC Submission
Submitted By: [Redacted] Date Submitted: 07/07/2024
Reviewer: [Redacted] Follow-Up Type: Document Submission Follow-Up Date: 07/06/2024

Inspections / Reviews *(continued)*

07/08/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/07/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

63a First Aid/CPR 1:35

1. Requirements

2800.

63.a. For every 35 residents, there shall be at least one staff person trained in first aid and certified in obstructed airway techniques and CPR present in the residence at all times to meet the needs of the residents.

Description of Violation

On 6/8/24 during the 3rd shift hours of 11pm to 6am the home had only 1 staff person with certified First aid and CPR training on site.

Plan of Correction

Accept () - 07/01/2024)

In response to the violation on 06/11/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 06/11/2024 by the Resident Services Director to [redacted] to ensure that there are the correct number of staff members scheduled on a shift to administer first aid obstructed airway techniques and CPR if needed, based off the current in house census.

To enhance the currently compliant operations, on 07/20/2024 the Resident Wellness Director [redacted], LPN will be holding a CPR/Basic First Aid class to certify additional staff to accommodate an increase in census, with a completion date of 07/20/2024.

Effective 06/11/2024 the Resident Services Director will perform weekly checks through 06/10/2025 to maintain ongoing compliance [redacted] will continue to ensure that for every 35 residents, there is at least one staff person trained in first aid and certified in obstructed airway techniques and CPR present in the residence at all times to meet the needs of the residents. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 07/20/2024

Implemented () - 07/08/2024)

103e Leftovers

2. Requirements

2800.

103.e. Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

Description of Violation

An unlabeled package of lunchmeat was found in the home's refrigerator located against the back wall of the kitchen.

Plan of Correction

Accept () - 07/01/2024)

In response to the violation on 06/11/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 06/11/2024 by the Food Service Director [redacted] correctly labeled and dated the package of deli meat.

To enhance the currently compliant operations:

- 1. on 06/11/2024 the All Food Service Staff will ensure that once a product is opened it will be stored properly with date, initials and labeled, with a completion date of 06/10/2025.
- 2. on 06/11/2024 the Food Service Director will [redacted] will perform weekly audits to check for deficiencies and correct immediately, with a completion date of 06/10/2025.

103e Leftovers (continued)

The overall completion date is 06/10/2025.

Effective 06/11/2024 the Managing Director will perform quarterly audits through 06/10/2025 to maintain ongoing compliance. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 06/10/2025

Implemented (█) - 07/08/2024)

132g Fire drills – days/times

3. Requirements

2800.

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.

Description of Violation

The home's fire drill logs indicate that the home conducted the following sleeping hour fire drills:

9/11/23 at 5:35am with 5 staff persons

1/25/24 at 5:00am with 6 staff persons

4/8/24 at 11:15pm with 6 staff persons

The home normally schedules 4 staff persons on 3rd shift. The home has only conducted the required sleeping hour fire drills during times when additional staff were present and has not conducted a sleeping hour drill with 3rd shift staff only.

Plan of Correction

Accept (█) - 07/01/2024)

In response to the violation on 06/11/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 06/11/2024 by the Managing Director and Resident Services Director to review upcoming fire drill schedules to ensure that the time and day of week stagger to and to ensure that only the correct amount of scheduled staff are present.

To enhance the currently compliant operations, on 07/15/2024 the Managing Director and Resident Services Director will be present to observe an overnight/sleeping hours fire drill with the 4 scheduled staff members only, with a completion date of 07/15/2024.

Effective 06/11/2024 the Managing Director and Resident Services Director will perform monthly checks through 06/10/2025 to maintain ongoing compliance with will ensure that fire drills are being 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. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 07/15/2024

Implemented (█) - 07/08/2024)

227d Support plan – med/dental

4. Requirements

2800.

227.d. Each residence shall document in the resident’s final support plan the dietary, medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident’s physician, physician’s assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a residence to pay for the cost of these medical and behavioral care services. The final support plan must document the assisted living services and supplemental health care services, if applicable, that will be provided to the resident.

Description of Violation

Resident #1 has a halo type enabler bar attached to their bed. The support plan dated 9/8/23 did not specify the type of bar being utilized by the resident or whether the bar requires a cover to meet FDA guidelines.

Plan of Correction

Accept ([redacted] - 07/01/2024)

In response to the violation on 06/11/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 06/11/2024 by the Regional Staff Development Manager to update and implement Columbia Cottage Policy 596: Bed Mobility Device to include form 300.12 ASP Appendix for Bed Mobility Device. Resident #1's ASP was updated to include Appendix listing the required information.

To enhance the currently compliant operations, on 06/24/2024 the Resident Services Director and Managing Director will ensure that any resident utilizing a bed mobility device will have ASP that contains the Appendix for bed mobility device, with a completion date of 06/10/2025.

Effective 06/11/2024 the Managing Director and Resident Services Director will perform various checks through 06/10/2025 to maintain ongoing compliance with • Checking the device every shift to ensure the device is secure to the bed, there are no gaps between the device and the mattress, the device is clean and free of hazards, and it is covered, if applicable. • Assessing the resident quarterly to ensure the resident is able to safely use the device as intended. • Maintenance checking the device monthly to ensure the device is installed and maintained according to manufacturer’s instructions. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 06/10/2025

Implemented ([redacted] - 07/08/2024)