

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

April 10, 2025

[REDACTED]
COLUMBIA COTTAGE - LINGLESTOWN LLC
[REDACTED]

RE: COLUMBIA COTTAGE -
LINGLESTOWN
1000 ALEXANDRA LANE
HARRISBURG, PA, 17110
LICENSE/COC#: 33781

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/26/2025 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 - LINGLESTOWN **License #:** 33781 **License Expiration:** 04/19/2025

Address: 1000 ALEXANDRA LANE, HARRISBURG, PA 17110

County: DAUPHIN **Region:** CENTRAL

Administrator

Name: [REDACTED] **Phone:** [REDACTED] **Email:** [REDACTED]

Legal Entity

Name: COLUMBIA COTTAGE - LINGLESTOWN LLC

Address: [REDACTED]

Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-1 **Date:** 08/30/2021 **Issued By:** Lower Paxton Township

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 89 **Waking Staff:** 67

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**

Reason: Complaint **Exit Conference Date:** 02/26/2025

Inspection Dates and Department Representative

02/26/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 76 **Residents Served:** 62

Special Care Unit

In Home: Yes **Area:** skyline **Capacity:** 22 **Residents Served:** 17

Hospice

Current Residents: n/m

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 67

Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0

Have Mobility Need: 27 **Have Physical Disability:** 1

Inspections / Reviews

02/26/2025 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 03/21/2025

03/19/2025 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 04/09/2025

Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 03/25/2025

Inspections / Reviews *(continued)*

03/21/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/09/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 04/11/2025

04/10/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/09/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

81b Resident equip – good repair

1. Requirements

2800.

81.b. Wheelchairs, walkers, prosthetic devices and other apparatus used by residents must be clean, in good repair and free of hazards.

Description of Violation

Resident [redacted] utilizes an enabler bar which is attached to the resident's bed. On [redacted] the cover of the enabler was not properly applied causing large openings measuring 6 inches by 6 inches on one side and 11 inches by 6 inches on the other. Additionally, the cover was observed to be ripped, preventing the cover from remaining in place causing potential entrapment hazards.

Plan of Correction

Accept ([redacted] - 03/20/2025)

In response to the violation on [redacted] 5 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 02/26/2025 by the Memory Care Director to cover the enabler bar with a pillowcase, ensuring there are no large openings. Family was notified on 2/26/25 to provide a new cover due to ripped cover causing issues with proper placement of cover.

To enhance the currently compliant operations, beginning on 03/17/2025 the Nurse/Med Tech will check daily for the proper placement and condition of enabler bar and enabler bar cover, with a completion date of 06/17/2025.

An initial audit by the RSD/MCD/Designee will be completed to ensure all other enablers in the home are properly covered with a completion date of 4/10/25.

Staff will be educated by the RSD/Designee on the requirements for enablers to be properly covered with a completion date of 4/10/25.

Effective 03/17/2025 the RSD/Designee will perform monthly audits/checks of all enablers in the home through 06/17/2025 to maintain ongoing compliance with proper placement and condition of enabler bar and cover. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 04/10/2025

Implemented ([redacted] - 04/10/2025)

182c Medication administration

2. Requirements

2800.

182.c. Medication administration includes the following activities, based on the needs of the resident:

182c Medication administration (continued)

Description of Violation

On [redacted] Staff Member C administered 10 medications to Resident [redacted] in the morning and failed to ensure the resident took all medications before documenting the administration. Per Staff Member B, the specific medications that were not ingested were unable to be determined by the residence due to the altered state of some of the medications.

Plan of Correction

Accept [redacted] - 03/19/2025)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 10/08/2024 by the Resident services director. Family reported finding pills in resident's bed. RSD reported medication error to DHS on 10/09/2025. RWD responsible for medication error was given a written warning and educated on the 7 Rights of Medication Administration.

On 10/12/2024 the Resident Wellness Director was removed from passing medications while reeducation was completed. Disciplinary action completed, with a completion date of 10/12/2024.

To maintain ongoing compliance on 10/12/2024 the Resident Service director observed Resident Wellness Director passing medications to ensure compliance on four different occasions (10/12/24 (x2) & 10/19/24 (x2). There were no errors observed.

Licensee's Proposed Overall Completion Date: 03/17/2025

Implemented [redacted] - 04/10/2025)

183d Current medications

3. Requirements

2800.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the residence.

Description of Violation

On [redacted], [redacted] prescribed for Resident [redacted] was in the residence's memory care medication cart; however, the medication was discontinued on [redacted].

Repeated Violation [redacted] et al.

Plan of Correction

Accept [redacted] 03/20/2025)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 02/26/2025 by the Resident Services Director to remove the Ativan .5mg from the memory care medication cart.

To enhance the currently compliant operations:

1. on 02/26/2025 the Resident Services Director contacted Pharmacy services to complete monthly med cart audit to maintain ongoing compliance to ensure that discontinued and expired medications are removed, with a completion date of ongoing.
2. on 03/17/2025 the Resident Services Director/Designee will provide training for Nurses and Med techs. They will be reeducated on the importance of removing any discontinued or expired medication, with a

183d Current medications (continued)

completion date of 4/10/25.

The overall completion date is 4/10/25

Effective 03/17/2025, to ensure that only current prescription, OTC, sample and CAM for individuals living in the home are being kept in the residence, the Resident Services Director/Designee will perform a random med cart audit monthly till 06/17/2025. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Pharmacy services will continue with monthly cart and medication audits for compliance with a completion date of ongoing.

Licensee's Proposed Overall Completion Date: 04/10/2025

Implemented [REDACTED] 04/10/2025)

183e Storing Medications

4. Requirements

2800.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

On [REDACTED], at 3:30PM, Resident [REDACTED] unopened and unused [REDACTED] was stored at room temperature in the memory care medication cart. The instructions for use and storage attached to the original container read, refrigerate until opened, leave unopened pens in the refrigerator, and once pens are opened, they must be stored in the medication cart. Staff Member B confirmed the medication was unopened, was not stored properly.

Plan of Correction

Accept [REDACTED] 03/20/2025)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 02/26/2025 by the Resident Services Director. The [REDACTED] was removed and disposed of. A new [REDACTED] was ordered.

To enhance the currently compliant operations, on 02/26/2025 the Resident Services Director will ensure that Pharmacy services continue to complete monthly med cart audits to maintain ongoing compliance to ensure that medications are properly stored, with a completion date of ongoing.

On 03/17/2025 the Resident Services Director/Designee will begin providing training for Nurses and Med techs. They will be reeducated on the importance of properly storing medication, with a completion date of 4/10/25.

Effective 03/17/2025 To ensure medications are properly stored, the Resident Services Director/Designee will perform a random med cart audit monthly till 06/17/2025. Purposes, prescription medications, OTC medications and CAM are being stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

183e Storing Medications (continued)

Pharmacy services will continue with monthly cart and medication audits for compliance with a completion date of ongoing.

Licensee's Proposed Overall Completion Date: 04/10/2025

Implemented [REDACTED] - 04/10/2025)

184a Resident meds labeled

5. Requirements

2800.

184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

2. The name of the medication.
4. The prescribed dosage and instructions for administration.
5. The name and title of the prescriber.

Description of Violation

On [REDACTED] at 9:30AM, the label on Resident [REDACTED] calmoseptine ointment and Resident [REDACTED] did not include the prescribed dosage and instructions for administration, or the name and title of the prescriber.

On [REDACTED], at 3:30PM, Resident [REDACTED] was not in the original container but stored in a ziplock bag with a physician's order taped to the bag. However, the order taped to the bag did not include the name of the medication, the prescribed dosage and instructions for administration, and the name and title of the prescriber.

On [REDACTED], Resident [REDACTED] medication label reads, take 1 tablet 3 times daily routine (8AM, 2PM, 8PM). However, the home reports that as of [REDACTED] the medication is prescribed 3 times daily, every 8 hours for pain and administers the medication at 6AM, 2PM, and 10PM.

Plan of Correction

Accept [REDACTED] - 03/20/2025)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 02/26/2025 by the Resident Services Director. The creams, lotions, and [REDACTED] were put in storage bags with the labels properly affixed. The labels were corrected to include all the required information. A change of direction sticker was placed on the tramadol noting the time change. PCP was contacted and order was changed to Q12 hours.

To enhance the currently compliant operations, on 03/03/2025 the Resident Services Director audited all med carts for compliance regarding medication storage and labeling, with a completion date of 06/17/2025.

The RSD/Designee will provide education to nurses/med techs regarding:

800.184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

1. The name of the medication.
2. The prescribed dosage and instructions for administration.
3. The name and title of the prescriber.

With a completion date of 4/10/25

184a Resident meds labeled (continued)

Effective 03/17/2025 To ensure medications are properly stored and labeled the Resident Services Director/Designee will perform a random med cart audit monthly till 06/17/2025. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Pharmacy services will continue with monthly cart and medication audits for compliance with a completion date of ongoing.

Licensee's Proposed Overall Completion Date: 04/10/2025

Implemented [redacted] - 04/10/2025)

185a Storage procedures

6. Requirements

2800.

185.a. The residence shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Since [redacted], Resident [redacted] is prescribed [redacted] (nutritional supplements), as needed if meal consumption is less than 50% 3 times a day. On [redacted], this supplement was not available in the residence.

Resident [redacted] is prescribed [redacted], take 1 tablet by mouth daily, hold when [redacted] is less than [redacted] less than [redacted]. On [redacted] the residence does not have records that Resident [redacted] and [redacted] is measured daily, prior to administration of the medication to determine if parameters are followed as ordered.

Repeated Violation - [redacted], et al.

Plan of Correction

Accept ([redacted] 03/19/2025)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken:

1. on 02/26/2025 the Memory Care Director contacted the family regarding the Ensure. Family no longer wanted Ensure for their [redacted] as [redacted] did not eat/drink the ensure. PCP was notified and ensure was discontinued.
2. on 02/26/2025 the Resident Services Director contacted the PCP to update order for parameters. This parameter order had been previously discontinued but not updated with the pharmacy. Therefore, the pharmacy label did not match the doctor's current order. The parameters are now in place and the doctor's order and pharmacy label match.

To enhance the currently compliant operations, on 03/03/2025 the Resident Services Director audited all med carts for compliance regarding medication availability. To enhance the currently compliant operation, the Resident Services Director is reviewing all physician orders to verify compliance with a completion date of 6/17/2025.

185a Storage procedures (continued)

Effective 03/17/2025 the Resident Services Director/Designee will perform a random med cart audit monthly till 06/17/2025 and will review all physician orders to verify compliance with a completion date of 6/17/2025. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Pharmacy services will continue with monthly cart and medication audits for compliance with a completion date of ongoing.

Licensee's Proposed Overall Completion Date: 03/19/2025

Implemented () - 04/10/2025)

187a Medication record

7. Requirements

2800.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

- 12. Diagnosis or purpose for the medication, including pro re nata (PRN).

Description of Violation

Resident () is prescribed () as needed for diarrhea. However, resident's February 2025 medication administration record does not include the diagnosis or purpose for the medication.

Plan of Correction

Accept () - 03/20/2025)

In response to the violation on () by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 02/26/2025 by the Resident Services Director/Designee to add indications for use for anti-diarrhea pill on the order which automatically updated the MAR.

To enhance the currently compliant operations, on 03/03/2025 the Resident Services Director/Designee audited all med carts for compliance regarding medication diagnosis and indication for usage, with a completion date of 06/17/2025. To enhance the currently compliant operation, the Resident Services Director is reviewing all physician orders to verify compliance with a completion date of 6/17/2025.

The RSD/Designee will provide education to nurses/med techs regarding:

2800.187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

- 12. Diagnosis or purpose for the medication, including pro re nata (PRN).

With a completion date of 4/10/25

187a Medication record (continued)

Effective 03/17/2025 the Resident Services Director/Designee will perform a random med cart audit monthly till 06/17/2025 and will review all physician orders to verify compliance with a completion date of 6/17/2025. The MAR is generated automatically when a physician order is entered in the system. Therefore, when the physician order is verified, the MAR will be too. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Pharmacy services will continue with monthly cart and medication audits for compliance with a completion date of ongoing.

Licensee's Proposed Overall Completion Date: 04/10/2025

Implemented (████) 04/10/2025)

187d Follow prescriber's orders

8. Requirements

2800.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Since ██████, Resident ██████ was prescribed ██████, take by mouth every 4 hours as needed for anxiety/restlessness. On ██████ the order was increased to ██████, take 1 tablet by mouth every 4 hours as needed for anxiety/restlessness. Resident ██████ was administered ██████ every 4 hours from 10AM on ██████ until 10AM on ██████ (7 administrations) in addition to ██████ on ██████ at 4:43PM and 10:00PM.

Plan of Correction

Accept ██████ - 03/19/2025)

In response to the violation on ██████ by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 12/17/2024 by the Resident Services Director. New order received from hospice on 12/15/2024 to increase ██████ hours PRN. Nurse transcribed the order incorrectly and placed the order as routine. Resident received 7 does until the error was found. Order was corrected. No adverse reactions noted. Med error was reported to DHS on 12/17/2024.

To enhance the currently compliant operations, on 12/21/2024 the Resident Services Director educated the nurse to follow all proper medication guidelines and procedures and to make sure that all residents are receiving the correct dosages, with a completion date of 12/21/2024.

Effective 03/17/2025 To enhance the currently compliant operation, the Resident Services Director/Designee is reviewing all physician orders to verify compliance with a completion date of 6/17/2025. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Pharmacy services will continue with monthly cart and medication audits for compliance with a completion date of ongoing.

Licensee's Proposed Overall Completion Date: 03/19/2025

187d Follow prescriber's orders (*continued*)

Implemented [REDACTED] 04/10/2025)