

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

May 27, 2025

[REDACTED] ADMINISTRATOR
WEAVERLAND MENNONITE HOMES
316 NORTH FIFTH STREET
DENVER, PA, 17517

RE: COCALICO CHRISTIAN HOME
316 NORTH FIFTH STREET
DENVER, PA, 17517
LICENSE/COC#: 32206

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/22/2025 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: COCALICO CHRISTIAN HOME License #: 32206 License Expiration: 09/10/2025
Address: 316 NORTH FIFTH STREET, DENVER, PA 17517
County: LANCASTER Region: CENTRAL

Administrator

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

Legal Entity

Name: WEAVERLAND MENNONITE HOMES
Address: 316 NORTH FIFTH STREET, DENVER, PA, 17517
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: Other Date: 08/03/2006 Issued By: Borough of Denver

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 11 Waking Staff: 8

Inspection Information

Type: Full Notice: Unannounced BHA Docket #: 0
Reason: Renewal Exit Conference Date: 04/22/2025

Inspection Dates and Department Representative

04/22/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 15 Residents Served: 11

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 2

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 11
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

04/22/2025 - Full

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 05/10/2025

05/08/2025 - POC Submission

Submitted By: [REDACTED] Date Submitted: 05/26/2025
Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 05/15/2025

Inspections / Reviews *(continued)*

05/13/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/26/2025

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 06/02/2025

05/27/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/26/2025

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

97 - Elevators/Lifting Devices

1. Requirements

2600.

97. Elevators and Stair Glides - Each elevator and stair glide must have a certificate of operation from the Department of Labor and Industry or the appropriate local building authority in accordance with 34 Pa. Code Chapter 405 (relating to elevators and other lifting devices).

Description of Violation

The home's stair glide does not have a certificate of operation from the Department of Labor and Industry or appropriate local building authority.

Plan of Correction

Accept (████ - 05/13/2025)

2600.97. Elevators and Stair Glides - on 4-22-2025, upon discovery that our stair glide did not have a certificate of operation, I called ██████████ our maintenance person on the same day. ██████████ on 4-22-2025 called Paramount who services and inspects our stair glide. Paramount did not have record of inspection or service to our stair glide. ██████████ scheduled Paramount to come and inspect and service our stair glide to be done on 4-24-2025.

On 4-24-2025, Paramount was here at Cocalico Christian Home and did the inspection and service to our stair glide. We now have posted by the stair glide a certificate of operation.

To prevent this from happening again, Administrator has put this concern on our Quality Management Plan to address and make certain, our stair glide is in compliance with regulation 2600.97 annually, by contacting our maintenance person to schedule stair glide inspection and service. This is scheduled to be done annually by our maintenance person as written on the October QMP.

Education and training on stair glide inspection scheduling was provided on 4/22/2025 to the Maintenance Director. For future compliance, the stair glide inspection is now on the maintenance Duties list for the maintenance supervisor to complete.

Proposed Overall Completion Date: 10/01/2025

Proposed Overall Completion Date: 05/31/2025

Licensee's Proposed Overall Completion Date: 05/30/2025

Implemented (████ - 05/27/2025)

107d - Procedure Emergency Management Agency Submission

2. Requirements

2600.

107.d. The written emergency procedures shall be reviewed, updated and submitted annually to the local emergency management agency.

Description of Violation

The home's written emergency procedures were reviewed on 3/20/25; however, it was not submitted to the local emergency agency.

Plan of Correction

Accept (████ - 05/08/2025)

2600.107.d. The written emergency procedures - Upon the surveyor's explanation and my understanding that even if there are no changes to the written emergency procedures, I as the administrator need to annually submit the written emergency procedures to the local emergency management agency.

On 4-22-2025, I placed a call to the Denver Boro and asked who to email the written emergency procedures. ██████████ ██████████ is who manages the emergency preparedness procedures. I emailed a copy of our Emergency Preparedness

107d - Procedure Emergency Management Agency Submission (continued)

Plan to [REDACTED] on 4-22-2025.

To prevent this violation from happening again, I have put this concern on our Quality Management Plan that I as administrator am to address and make certain, that our Emergency Preparedness Plan is in compliance with regulation 2600.107d by emailing the Denver Boro to [REDACTED] our written emergency procedures. This is scheduled to be done annually as written on the QMP.

Licensee's Proposed Overall Completion Date: 05/05/2025

Implemented ([REDACTED] - 05/27/2025)

184a - Resident's Meds Labeled

3. Requirements

2600.

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.
- 3. The date the prescription was issued.
- 4. The prescribed dosage and instructions for administration.
- 5. The name and title of the prescriber.

Description of Violation

The pharmacy label for Resident #1's Foracort inhaler does not include the following:

- 2. The name of the medication.
- 3. The date the prescription was issued.
- 4. The prescribed dosage and instructions for administration.
- 5. The name and title of the prescriber.

Plan of Correction

Accept ([REDACTED] - 05/13/2025)

2600.184.a. The original container for prescription medications shall be labeled with a pharmacy label-

The pharmacy label for Resident #1's Foracort inhaler did not include the name of the medication, the date the prescription was issued, the prescribed dosage and instructions for administration, the name and title of the prescriber. (The resident's family provides the Foracort through mail order but it does not have the required label information.)

On 4-22-2025, nurse [REDACTED] corrected the error with the advice from the surveyor and a new label with required information was put with the medication.

To ensure that we remain compliant to this regulation 2600.184 all future mail order medication will be checked by nurse [REDACTED] LPN and ensure that a written label with all required information is contained with the medication.

Medication sheets printed from our pharmacy are checked monthly by Nurse [REDACTED] for all medications.

Education and training were given to Nurse [REDACTED] on 4-22-2025 regarding compliance with the necessary medication label information.

The initial audit for all current medication in our Cocalico Christian Home to ensure that each medication has appropriate labels with required information was done on 4-22-2025 by the nurse [REDACTED].

The date for ongoing monthly audits done by the nurse [REDACTED] to ensure that each medication has appropriate labels is starting May 30th, 2025. This audit will be ongoing monthly as scheduled by the nurse [REDACTED]

Licensee's Proposed Overall Completion Date: 05/30/2025

184a - Resident's Meds Labeled (continued)

Implemented () - 05/27/2025)

185a - Implement Storage Procedures

4. Requirements

2600.

185.a. The home 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

Resident #3 is prescribed Mucinex DM ER 600-30mg as needed. On 4/22/25, this medication was not available in the home.

Plan of Correction

Accept () - 05/13/2025)

2600.185.a.

The home shall develop and implement procedures -

Resident #3 had an order for the Mucinex DM ER 600-30mg as needed, that was not available in the home.

Resident was no longer using this medication, so the Nurse () LPN) faxed our medical provider () and got the Mucinex medication discontinued on 4-24-2025.

To prevent this from happening again, our nurse () is scheduled to address and make certain, our medication orders are in compliance with regulation 2600.185a. Once a month the pharmacy () provides the Medication Administration Records. () LPN will do monthly checks on medication records and orders for meds.

The education for the nurse () for maintaining this compliance was done on 4-22-2025 by Administrator ().

The initial audit to ensure all currently prescribed PRNs are available in the home was done on 4-22-2025 by the nurse ().

The date for ongoing monthly audits are to be done by the nurse () to ensure that all currently prescribed PRNs are available in the home is starting May 30th, 2025. This audit will be ongoing monthly as scheduled by the nurse ().

Licensee's Proposed Overall Completion Date: 05/30/2025

Implemented () - 05/27/2025)

187a - Medication Record

5. Requirements

2600.

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).

187a - Medication Record (continued)

Description of Violation

Resident #2 is prescribed Docusate Sodium 100mg, Morphine 5mg, and Klor-con 20meq. However, the resident's April 2025 medication administration record does not indicate diagnosis or purpose for these medications.

Plan of Correction

Accept ([redacted] - 05/13/2025)

2600.187.a. A medication record shall be kept to include the following for each resident for whom medications are administered-Diagnosis or purpose for the medication-

Resident #2 is prescribed Docusate Sodium 100mg, Morphine 5mg, and Klor-con 20meq. However, the resident's April 2025 medication administration record does not indicate diagnosis or purpose for these medications.

Plan of correction - the diagnosis was written on each of these medication on 4-22-2025.

In order to be compliant with regulation 260o.187, nurse [redacted] LPN will be checking the MARS monthly to ensure that every medication has a diagnosis or purpose for the medications written in the MAR.

Any medication that does not include a diagnosis will be addressed with the medical provider in order to obtain a diagnosis for each medication.

The person responsible for correcting Resident #2 MAR was the nurse [redacted] on 4-22-2025.

The education for the person responsible (the nurse [redacted] for maintaining this compliance was given to the nurse [redacted] by Administrator [redacted] on 4-22-2025.

The initial audit to ensure all current medications are located on the MARs was done on 4-22-2025 by the Nurse [redacted].

The ongoing audit to ensure all current medications are located on the MARs will start on May 30, 2025, as MARs are provided by the Health Direct pharmacy and checked by nurse [redacted]. This audit will continue monthly by nurse as scheduled on nurses' duty checklist.

Licensee's Proposed Overall Completion Date: 05/30/2025

Implemented ([redacted] - 05/27/2025)