

Department of Human Services  
Bureau of Human Service Licensing

March 26, 2021

██████████ COO AND GENERAL COUNSEL  
COLUMBIA WEGMAN SOUTHAMPTON LLC  
1910 FAIRVIEW AVE E, SUITE 200  
SEATTLE, WA 98102

RE: THE LANDING OF SOUTHAMPTON  
1160 STREET ROAD  
SOUTHAMPTON, PA, 18966  
LICENSE/COC#: 14538

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/05/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Shawn Parker

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

**Facility Information**

**Name:** THE LANDING OF SOUTHAMPTON      **License #:** 14538      **License Expiration Date:** 02/10/2021  
**Address:** 1160 STREET ROAD, SOUTHAMPTON, PA 18966  
**County:** BUCKS      **Region:** SOUTHEAST

**Administrator**

**Name:** [REDACTED]      **Phone:** 2157916666      **Email:** [REDACTED]

**Legal Entity**

**Name:** COLUMBIA WEGMAN SOUTHAMPTON LLC  
**Address:** 1910 FAIRVIEW AVE E, SUITE 200, SEATTLE, WA, 98102  
**Phone:** 2157916666      **Email:** na

**Certificate(s) of Occupancy**

**Type:** Other      **Date:** 09/11/2019      **Issued By:** CWOPA L&I

**Staffing Hours**

**Resident Support Staff:** 0      **Total Daily Staff:** 27      **Working Staff:** 20

**Inspection**

**Type:** Partial      **Notice:** Unannounced      **BHA Docket #:**  
**Reason:** Monitoring      **Exit Conference Date:** 10/05/2020

**Inspection Dates and Department Representative**

10/05/2020 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 106      **Residents Served:** 19

**Secured Dementia Care Unit**

**In Home:** Yes      **Area:** Memory Care      **Capacity:** 36      **Residents Served:** 2

**Hospice**

**Current Residents:** 1

**Number of Residents Who:**

**Receive Supplemental Security Income:** 0      **Are 60 Years of Age or Older:** 18  
**Diagnosed with Mental Illness:** 2      **Diagnosed with Intellectual Disability:** 0  
**Have Mobility Need:** 8      **Have Physical Disability:** 2

**Inspections / Reviews**

10/05/2020 Partial

**Lead Inspector:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 10/17/2020

Inspections / Reviews *(continued)*

3/25/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow Up Type: *Document Submission*Follow-Up Date: *04/01/2021*

3/26/2021 Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

**18 - Compliance With Laws****1. Requirements**

2600.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

**Description of Violation**

*Personal care and assisted living homes must post the required influenza information in a public place in the home year round. According to the Influenza Awareness Act (HB 1785). On 10 05 20, at 10:00 am, there was no Influenza poster posted in an area accessible to residents.*

**Plan of Correction****Accept**

*Home will post influenza poster immediately in a conspicuous public place. Administrator or designee will do daily rounds to ensure poster is displayed.*

**Completion Date:** 10/05/2020

**Document Submission****Implemented**

*Home posted influenza poster immediately in a conspicuous public place. Administrator or designee will do daily rounds to ensure poster is displayed.*

**54a - Direct Care Staff****1. Requirements**

2600.

54.a. Direct care staff persons shall have the following qualifications:

1. Be 18 years of age or older, except as permitted in subsection (b).
2. Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry.
3. Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care services with reasonable skill and safety.

**Description of Violation**

*Direct care staff person #1, does not have a high school diploma, GED, or active registry status on the Pennsylvania nurse aide registry.*

**Plan of Correction****Accept**

*Qualifications for staff person #1 will be obtained immediately and made available for Department review. Home will do an audit by 3/23/2021 to ensure all direct care staff persons have qualifications specified in regulation 2600.54a*

**Completion Date:** 10/31/2020

**Document Submission****Implemented**

*Qualifications for staff person #1 will be obtained immediately and made available for Department review. Home will do an audit by 3/23/2021 to ensure all direct care staff persons have qualifications specified in regulation 2600.54a*

**103c - Food Protected****1. Requirements**

2600.

- 103.c. Food shall be protected from contamination while being stored, prepared, transported and served.

103c - Food Protected (*continued*)**Description of Violation**

*On 10/5/20 at 12:57 pm there was an uncovered dish of curry stew stored in the walk-in refrigerator located in the kitchen.*

*On 10/5/20 at 12:57 pm there were four large plastic storage tubs, roughly the size of a trash can, uncovered, containing rice, flour, sugar, and breadcrumbs stored in the dry storage area located in the kitchen.*

**Plan of Correction****Accept**

*Home will discard all food items exposed to contamination. All food items shall be covered and dated and protected from contamination in accordance with 2600.103c*

**Completion Date:** 10/05/2020

**Document Submission****Implemented**

*Home will discard all food items exposed to contamination. All food items shall be covered and dated and protected from contamination in accordance with 2600.103c*

## 103e - Left Overs

**1. Requirements**

2600.

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**

*At 1:00 pm, in the walk-in freezer, there was an open bag of frozen Danish, not sealed and not dated.*

*At 1:00 pm, in the walk-in freezer, there were open bags of frozen peas, lima beans, brussels sprouts, asparagus, and zucchini with no labels and no dates.*

*At 1:02 pm, in the walk-in freezer, there was an open box of breakfast sausages not dated.*

*At 1:02 pm, in the walk-in freezer, there was a bag frozen pepperoni that was opened and not dated.*

*At 1:03 pm, in the walk-in freezer, there was an open bag of chicken strips not dated.*

*At 1:03 pm, in the walk-in freezer, there was an open box of fish not dated.*

*At 1:05 pm, in the dry storage area, there was a plastic tub with penne pasta that was not labeled and dated.*

*At 1:06 pm, in the dry storage area, there were open bags of macaroni and egg noodles in a plastic tub and neither bag was dated.*

*At 1:06 pm, in the dry storage area, there was an open bag of spaghetti that was not dated.*

*At 1:08 pm, in the dry storage area, there was an open bag of chocolate chips that was not dated.*

*At 1:10 pm, in the dry storage area, there were four large plastic storage tubs, roughly the size of a trash can, containing rice, flour, sugar, and breadcrumbs that were not dated.*

**Plan of Correction****Accept**

*Home will ensure all leftover food items are labeled and dated.*

**Completion Date:** 10/05/2020

**Document Submission****Implemented**

*Home will ensure all leftover food items are labeled and dated.*

## 103g - Storing Food

**1. Requirements**

2600.

**103g - Storing Food (continued)**

103.g. Food shall be stored in closed or sealed containers.

**Description of Violation**

*At 12:57 pm, in the walk-in refrigerator located in the kitchen, dish of curry stew was not covered.*

*At 12:59 pm, in the walk-in freezer located next to the walk-in refrigerator, there were two open bags of frozen cookie dough, 1 oatmeal and 1 chocolate chip, that were not completely sealed.*

*At 1:00 pm, in the walk-in freezer, there was an open bag of frozen Danish not sealed.*

*At 1:02 pm, in the walk-in freezer, there was an open box of breakfast sausages not sealed.*

*At 1:03 pm, in the walk-in freezer, there was an open box of fish not sealed.*

*At 1:10 pm, in the dry storage area, there were four large plastic storage tubs, roughly the size of a trash can, containing rice, flour, sugar, and breadcrumbs that were uncovered.*

**Plan of Correction****Accept**

*Home will ensure all food items are in sealed or closed containers in accordance with regulation 2600.103g*

**Completion Date:** 10/05/2020

**Document Submission****Implemented**

*Home will ensure all food items are in sealed or closed containers in accordance with regulation 2600.103g*

**224c - Preadmission Screening****1. Requirements**

2600.

224.c. The preadmission screening shall be completed by the administrator or designee. If the resident is referred by a State-operated facility, a county mental health and intellectual disability program, a drug and alcohol program or an area agency on aging, a representative of the referral agent may complete the preadmission screening.

**Description of Violation**

*The preadmission screening form, dated 2/3/20, for resident # 1, admitted [REDACTED], was completed by Staff Member B. The section requiring the signature of the person completing the screening was not signed.*

*The preadmission screening form, dated 7/2/20, for resident # 2, admitted [REDACTED], was completed by the administrator. The section requiring the signature of the person completing the screening was not signed.*

**Plan of Correction****Accept**

*Home will ensure all pre-screen forms are completed by individuals specified in regulation 2600.224c in a timely manner and signed. The e-signature must print out from the documentation software or otherwise be physically signed.*

**Completion Date:** 10/05/2020

**Document Submission****Implemented**

*Home will ensure all pre-screen forms are completed by individuals specified in regulation 2600.224c in a timely manner and signed. The e-signature must print out from the documentation software or otherwise be physically signed.*

**227d - Support Plan Medical/Dental****1. Requirements**

**227d - Support Plan Medical/Dental (continued)**

2600.

227.d. Each home shall document in the resident's support plan the 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 home to pay for the cost of these medical and behavioral care services.

**Description of Violation**

*The assessment for resident #2, dated 7/2/20, indicates the resident has needs for drinking, securing healthcare, ambulating, personal hygiene, managing health care, securing health care, doing laundry, shopping, securing and using transportation, managing finances, managing and keeping appointments, engaging in social and leisure activities, orientation to time, place, and person, irritability, judgement, and agitation. The resident's support plan, dated 7/2/20 does not document descriptions of the service needs and explanations on how these needs will be met.*

**Plan of Correction****Accept**

*The support plan for resident #2 will be updated to reflect the responsible party to address the resident needs. Support plans for all residents to be audited by 3/23/2021 to ensure accuracy.*

**Completion Date:** 10/30/2020

**Document Submission****Implemented**

*The support plan for resident #2 will be updated to reflect the responsible party to address the resident needs. Support plans for all residents to be audited by 3/23/2021 to ensure accuracy.*

**227g -Support Plan Signatures****1. Requirements**

2600.

227.g. Individuals who participate in the development of the support plan shall sign and date the support plan.

**Description of Violation**

*The initial support plan, not dated, for resident #1, did not have signatures of the staff person who participated in the development of the plan nor the resident.*

*The support plan dated 9/9/20, for resident #1, did not have signatures of the staff person who participated in the development of the plan nor the resident.*

*The support plan dated 7/2/20, for resident #2, did not have signatures of the staff person who participated in the development of the plan nor the resident.*

**Plan of Correction****Accept**

*Home will ensure all responsible parties sign and date support plans in accordance with regulation 2600.227g*

**Completion Date:** 10/30/2020

**Document Submission****Implemented**

*Home will ensure all responsible parties sign and date support plans in accordance with regulation 2600.227g*