

Department of Human Services  
Bureau of Human Service Licensing

November 1, 2021

[REDACTED]  
[REDACTED]  
COLUMBIA WEGMAN SOUTHAMPTON LLC  
[REDACTED]  
[REDACTED]

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

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/30/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Mia Johnson

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

**Facility Information**

Name: *THE LANDING OF SOUTHAMPTON* License #: *14538* License Expiration Date: *02/10/2022*  
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: *999 THIRD AVENUE, SUITE 4550, SEATTLE, WA, 98104*  
Phone: *2157916666* Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *Other* Date: *09/20/2019* Issued By: *Upper South Hampton Township*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *42* Waking Staff: *32*

**Inspection**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Complaint* Exit Conference Date: *07/30/2021*

**Inspection Dates and Department Representative**

*07/30/2021 - On-Site:* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *106* Residents Served: *39*

**Secured Dementia Care Unit**

In Home: *Yes* Area: *Opal* Capacity: Residents Served: *11*

**Hospice**

Current Residents: *5*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *38*  
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *3* Have Physical Disability: *1*

## Inspections / Reviews

07/30/2021 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *09/11/2021*

10/5/2021 - POC Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *10/08/2021*

11/1/2021 - Document Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Not Required*

## 60b - Additional Staffing

## 1. Requirements

2600.

- 60.b. The Department may require additional staffing as necessary to protect the health, safety and well-being of the residents. Requirements for additional staffing will be based on the resident's assessment and support plan, the design and construction of the home and the operation and management of the home.

## Description of Violation

*On 7/30/21, the home served breakfast late due to only having one server for PC and memory care. The scheduled 10:00 am activity was not held due to being understaffed. According to staff interviews the home is understaffed often and resident needs are not always met.*

## Plan of Correction

Accept

*The posted opening time of 7:30 am for breakfast and the 10:00 am activity did not commence as scheduled due to unforeseen circumstances on 07/30/21. Staff schedules are based on meeting the health, safety and well-being of residents, and included adequate staff to open the dining room on time and conduct the 10 am activity. Community staff may not be aware of unforeseen circumstances that affect the schedule on a given day/shift. When the staffing level is not at the anticipated level, the management team provides support promptly upon being made aware of the situation, including working "floor shifts", calling off-duty staff, resourcing agency resources and enacting other labor contingency plans. Under the direction of the General Manager, the community is actively implementing staffing retention and recognition programs and recruiting new staff through creative outreach is a priority and is being supported by the corporate recruiting resources.*

**Completion Date:** 08/01/2021

## Document Submission

Implemented

*Please see attached documentation of staffing reports indicating staff are present and available.*

## 85a - Sanitary Conditions

## 1. Requirements

2600.

- 85.a. Sanitary conditions shall be maintained.

## Description of Violation

*Soiled personal products were not being disposed of properly in the appropriate trash receptacles. Staff person A, reports that family members are assisting with removing the trash from the rooms. The soiled personal care products were disposed of in the trash receptacle located outside of the home.*

## Plan of Correction

Accept

*In accordance with the community's infection control practices, trash from restrooms is to be considered contaminated waste and double bagged. Designated outdoor receptacles are to be lidded to prevent contamination. The General Manager has reviewed the community's infection control and trash removal practices with community employees, residents and family members. Residents and guest are encouraged to report any potentially unsafe situations and staff are required to report and document unsafe situations. The General Manager will ensure reports of unsafe practices are investigated and resolved to ensure ongoing sanitary conditions are maintained.*

**Completion Date:** 08/01/2021

**85a - Sanitary Conditions** *(continued)***Document Submission****Implemented**

*Please see attached. Retraining of sanitary conditions has been completed this week by corporate staff.*