



CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: DECEMBER 28, 2022

[REDACTED]
[REDACTED]
Columbia Wegman Southampton LLC
[REDACTED]
[REDACTED]

RE: The Landing of Southampton
1160 Street Road
Southampton, Pennsylvania 18966
License #: 145382

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) licensing inspection August 1 and 12, 2022, September 22, 26, and 30, 2022, October 17, 2022, and November 21 and 22, 2022 of the above facility, the violations specified on the enclosed Licensing Inspection Summary (LIS) were found.

Based on violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), the Department hereby issues you a **SECOND PROVISIONAL** license to operate the above facility. A **SECOND PROVISIONAL** license is being issued based on your acceptable plan to correct the violations as specified on the LIS. This decision is made pursuant to 62 P.S. § 1026 (b)(1) ;(4) and 55 Pa. Code § 20.71(a)(2) ;(3) ;(4) ; (5) ;(6) (relating to conditions for denial, nonrenewal or revocation). Your **SECOND PROVISIONAL** license is enclosed and is valid from December 28, 2022 to June 28, 2023.

All violations specified on the LIS must be corrected by the dates specified on the report and continued compliance with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), must be maintained. Failure to implement the plan of correction or failure to maintain compliance may result in a revocation of the license.

Mr. Michael Juno

Pursuant to 62 P.S. 1085-1087 and 55 Pa. Code § 2600.261-268 or § 2800 (relating to enforcement), the Department intends to assess a fine for the following violation(s) unless fully corrected on or before the mandated correction date.

55 Pa. Code Chapter 2600 or 2800 Section:	Class of Violation	Census at Inspection	Fine Per Resident X Per day	Calculated Fine = Per Day	Mandated Correction Date (to avoid Fine)
141 b1	III	37	\$3	\$111	15 calendar days from mailing date of this letter
187 b	II	37	\$5	\$185	5 calendar days from mailing date of this letter
187 d	II	37	\$5	\$185	5 calendar days from mailing date of this letter

A fine will be assessed daily beginning with the date of this letter and will continue until the violation is fully corrected, and full compliance with the regulation has been achieved. If the violation is fully corrected, and full compliance with the regulation has been achieved, by the mandated correction date, no fine will be assessed. You must notify the Department's Regional Human Services Licensing office in writing as soon as each violation is fully corrected and submit written documentation of each correction. The Department will conduct an on-site inspection after the mandated correction date, and within 20 calendar days of the date of this letter. If one or more violations is not fully corrected and full compliance with the regulation has not been achieved, you will periodically receive invoices from the Department's Bureau of Human Services Licensing with payment instructions. The fines will continue to accumulate until the violation is fully corrected and full compliance with the regulation has been achieved.

No fine is being assessed at this time; therefore, you may not appeal any fine at this time. If a violation is not corrected and full compliance with the regulation has not been achieved by the mandated correction date, a fine will be assessed and an invoice will be mailed. This invoice will contain the right to appeal the fine.

If you disagree with the decision to issue a SECOND PROVISIONAL license, you have the right to appeal through hearing before the Bureau of Hearings and Appeals, Department of Human Services in accordance with 1 Pa. Code Part II, Chapters 31-35.

Mr. Michael Juno

If you decide to appeal your SECOND PROVISIONAL license, a written request for an appeal must be received within 10 days of the date of this letter by:

[REDACTED]
Pennsylvania Department of Human Services
Bureau of Human Services Licensing
Room 631, Health and Welfare Building
625 Forster Street
Harrisburg, Pennsylvania 17120
PH: 717-214-1304

This decision is final 11 days from the date of this letter, or if you decide to appeal, upon issuance of a decision by the Bureau of Hearings and Appeals.

Sincerely,

Jamie F. Buchenauer

Jamie Buchenauer
Deputy Secretary
Office of Long-term Living

Enclosure
Licensing Inspection Summary

cc:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

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

Facility Information

Name: *THE LANDING OF SOUTHAMPTON* License #: *14538* License Expiration: *10/12/2022*
Address: *1160 STREET ROAD, SOUTHAMPTON, PA 18966*
County: *BUCKS* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *COLUMBIA WEGMAN SOUTHAMPTON LLC*
Address: [REDACTED]
Phone: *2157916666* Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *53* Waking Staff: *40*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint, Incident* Exit Conference Date: *10/17/2022*

Inspection Dates and Department Representative

09/22/2022 - On-Site: [REDACTED]
09/26/2022 - Off-Site: [REDACTED]
09/30/2022 - Off-Site: [REDACTED]
10/17/2022 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *106* Residents Served: *36*

Secured Dementia Care Unit

In Home: *Yes* Area: *Opal* Capacity: *36* Residents Served: *9*

Hospice

Current Residents: *-*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *35*
Diagnosed with Mental Illness: *15* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *17* Have Physical Disability: *1*

Inspections / Reviews

09/22/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/31/2022*

11/02/2022 - POC Submission

Submitted By: [REDACTED] Date Submitted: *11/04/2022*
Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *11/05/2022*

12/15/2022 - Document Submission

Submitted By: [REDACTED] Date Submitted: *11/04/2022*
Reviewer: [REDACTED] Follow-Up Type: *Enforcement*

16c - Written Incident Report

1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On 02/08/22, resident 1 fell in the home resulting in an injury.

On 02/27/22, resident 2 fell in the home due to a change in health status.

On 02/28/22, resident 3 fell in the home due to a change in health status.

On 04/08/22, resident 4 fell in the home resulting in a change in health status.

On 04/29/22, resident 5 fell in the home resulting in an injury.

On 07/05/22, resident 6 fell in the home due to a change in health status.

On 09/11/22, resident 7 fell in the home due to a change in health status.

The home did not report these incidents to the Department as required by regulation.

Repeat Violation: 9/16/2021 et al

POC Submission

Accept (█ - 11/02/2022)

Given the Department is aware of the 7 incidents cited in this Plan of Correction, they will be documented as cited and not be submitted in arrears to the Department.

The HWD, GM/designee will monitor Electronic Reporting on a daily basis for incidents and resident notes and report falls that occur to the Personal Care Regional Home Office or the complaint hotline within the designated 24-hour reporting period following the incident, regardless of whether or not medical treatment provided effective 10/01/22.

HWD will conduct In-Services on fall risks and fall prevention with staff November 3-4, 2022.

Licensee's Plan Completion Date: 11/04/2022

Not Implemented (█ - 12/15/2022)

185b - Medication Procedures

2. Requirements

2600.

185.b. At a minimum, the procedures must include:

1. Documentation of the receipt of controlled substances and prescription medications.
2. A process to investigate and account for missing medications and medication errors.
3. Limited access to medication storage areas.
4. Documentation of the administration of prescription medications, OTC medications and CAM for residents who receive medication administration services or assistance with self-administration. This requirement does not apply to a resident who self-administers medication without the assistance of a staff person and stores the medication in his room.

Description of Violation

On 9/11/22, staff persons A, B, and C did not follow the homes policy for accountability of narcotic medications, resulting in a miscount of narcotics.

On 9/11/22, at approximately 7:30 pm, staff person A administered an Oxycodone tablet to resident 9 as prescribed. Upon returning the medication to the storage cabinet, staff person A signed off on the resident's narcotics declining

185b - Medication Procedures (continued)

inventory log but did not do a count of the tablets still present in the medication blister card. After the administration there should have been 14 tablets in the blister card but there were only 13. Staff person A didn't see that a tablet had been accidentally popped from the blister pack and was loose in the bag used to transport narcotics medications. On 9/11/22, at the 11 pm shift count, staff persons B and C reported that the counts appeared correct, and the missing tablet was not noted at that time. Additionally, during the 11 pm shift count on 9/11/22, staff person B was not present for the narcotics count as they were running late to work. Staff persons A and C completed the count together, where the missing pill was not noted, however staff B signed off on the count instead of staff person C even though they did not actually perform the count with staff person A. On 9/12/22, during the 7 am shift count it was discovered that there were only 13 tablets in the blister pack when there should have been 14. The missing tablet was located in the narcotics bag on the afternoon of 9/13/22 and then destroyed according to policy.

POC Submission

Accept ([REDACTED] - 11/02/2022)

Due to repeat medication errors, staff member B is no longer employed by The Landing and corrective action was taken for staff members A and C.

HWD will conduct an in-service for all med techs October 28 and 31 on accountability of medication and controlled substances.

HWD and GM/designee are responsible for weekly narcotic audits starting 8/31/22 and daily narcotic log audits effective 10/01/22 with both scheduled to continue throughout 2022 with appropriate action taken following each audit.

Licensee's Plan Completion Date: 10/31/2022

Implemented ([REDACTED] 12/15/2022)

186b - Medication Used by Resident**3. Requirements**

2600.

186.b. Prescription medications shall be used only by the resident for whom the prescription was prescribed.

Description of Violation

On 9/15/22, at 9:00 pm, resident 8 was administered Alprazolam 0.5 mg prescribed for and belonging to another resident. Resident 8 does not have an order for Alprazolam.

POC Submission

Accept ([REDACTED] - 11/02/2022)

The six rights were not followed whereby one must confirm The Right Resident, The Right Medication.

Staff member C was temporarily removed from medication administration responsibilities until completing two successful med pass observations conducted 9/22/22 and 10/18/22 by HWD/RN.

Staff attended 9/15 in-services on general med pass rules and responsibilities, med errors, reporting and documentation and are scheduled to participate in med pass observations with HWD/RN twice weekly starting 9/22/22. Twice weekly med pass observations will continue throughout the 2022 calendar year and begin once weekly observations through the first quarter of 2023.

186b - Medication Used by Resident (continued)

Licensee's Plan Completion Date: 10/27/2022

Not Implemented (████ - 12/15/2022)

187d - Follow Prescriber's Orders

4. Requirements

2600.
187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident 8 is prescribed Zolpidem 10 mg- take one by mouth daily scheduled for 9 pm. However, resident 8 was administered Alprazolam 0.5 mg on 9/15/22 at 9 pm.

Repeat Violation: 9/16/2021 et al

POC Submission

Accept (████ - 11/02/2022)

The six rights were not followed whereby one must confirm The Right Resident, The Right Medication.

Staff member C was temporarily removed from medication administration responsibilities until completing two successful med pass observations conducted 9/22/22 and 10/18/22 by HWD/RN.

Staff attended 9/15 in-services on general med pass rules and responsibilities, med errors, reporting and documentation and are scheduled to participate in med pass observations with HWD/RN twice weekly starting 9/22/22. Twice weekly med pass observations will continue throughout the 2022 calendar year and begin once weekly observations through the first quarter of 2023.

Licensee's Plan Completion Date: 10/27/2022

Not Implemented (████ - 12/15/2022)