

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

March 22, 2023

MICHAEL JUNO, VICE PRESIDENT OF OPERATIONS
COLUMBIA WEGMAN SOUTHAMPTON LLC
[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 01/26/2023 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: THE LANDING OF SOUTHAMPTON License #: 14538 License Expiration: 06/28/2023
Address: 1160 STREET ROAD, SOUTHAMPTON, PA 18966
County: BUCKS Region: SOUTHEAST

Administrator

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

Legal Entity

Name: COLUMBIA WEGMAN SOUTHAMPTON LLC
Address: 999 THIRD AVENUE, SUITE 4550, SEATTLE, WA, 98104
Phone: [REDACTED]

Certificate(s) of Occupancy

Type: Other Date: 09/20/2019 Issued By: upper Southampton township

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 67 Waking Staff: 50

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Incident Exit Conference Date: 01/26/2023

Inspection Dates and Department Representative

01/26/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 106 Residents Served: 37

Secured Dementia Care Unit

In Home: Yes Area: Opal Capacity: 36 Residents Served: 10

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 35
Diagnosed with Mental Illness: 14 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 30 Have Physical Disability: 0

Inspections / Reviews

01/26/2023 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 03/04/2023

03/07/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: 03/16/2023
Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 03/09/2023

Inspections / Reviews (*continued*)

03/22/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/16/2023

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [REDACTED], resident 1 a Secure Dementia Unit resident put their coat and hat on and exited through stairwell 3 of the Secure Dementia Unit. The resident set off the alarm on the door while staff person A watched the resident leave through the exit and did not go after the resident. Staff person B came over from the another area and staff person A pointed at the door and stated, "they went out that door". Staff person B then ran out the door and after the resident. Staff person B was then met by staff person C who was driving into work for their shift and observed resident 1 walking out towards the exit of the parking lot onto the street.

Plan of Correction**Accept (MJ - 03/07/2023)**

Resident was new to community; exit seeking due to being unsettled and exhibiting agitation and anxiety.

Staff person A was terminated due to failure to respond to a residents needs, and endangering a resident by not following elopement protocols.

- 1. Conducted In-Services with staff to education on elopement policy and procedure on 2/8/23 and 2/13/23.*
- 2. Conducted three (3) successful elopement drills 01/25/23, 2/8/23 and 2/22/23 across all shifts.*
- 3. Resident was evaluated by MD and psychologist. A care conference was held with the family to discuss allowing more time for the resident to adjust to her new environment. Medications were also adjusted to reduce anxiety and a 1:1 caregiver was provided by the family with the community also monitoring behaviors. Effective 2/28/23 resident was transitioned to a Memory Care Community better suited to address [REDACTED] ongoing anxiety and agitation.*
- 4. The community will conduct quarterly education to address causation and preventitive measures starting 02/08/2023; as well as quarterly elopement drills starting 02/22/23.*
- 5. The community has engaged with an electrician to obtain costs and timeline to remove the 15 second release on unit exist doors to prevent resident elopements from the building while ensuring all door locks drop via the engagement of a fire alarm or through the emergency release option in the Wellness office. Waiting on costs and dates to determine next steps.*

Licensee's Proposed Overall Completion Date: 03/03/2023

Implemented (MJ - 03/22/2023)