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

June 4, 2025

[redacted]
COLUMBIA COTTAGE HANOVER LLC
[redacted]

RE: COLUMBIA COTTAGE HANOVER, LLC
2288 GRANDVIEW ROAD
HANOVER, PA, 17331
LICENSE/COC#: 33022

[redacted],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/07/2025 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: *COLUMBIA COTTAGE HANOVER, LLC* **License #**: *33022* **License Expiration**: *05/08/2026*

Address: *2288 GRANDVIEW ROAD, HANOVER, PA 17331*

County: *YORK* **Region**: *CENTRAL*

Administrator

Name: [redacted] **Phone**: [redacted] **Email**: [redacted]

Legal Entity

Name: *COLUMBIA COTTAGE HANOVER LLC*

Address: [redacted]

Phone: [redacted] **Email**: [redacted]

Certificate(s) of Occupancy

Type: *C-2 LP* **Date**: *03/15/2007* **Issued By**: *Labor & Industry*

Type: *I-1* **Date**: *03/26/2007* **Issued By**: *Penn Township*

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff**: *58* **Waking Staff**: *44*

Inspection Information

Type: *Partial* **Notice**: *Unannounced* **BHA Docket #**: *0*

Reason: *Incident* **Exit Conference Date**: *05/07/2025*

Inspection Dates and Department Representative

05/07/2025 - On-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *48* **Residents Served**: *37*

Special 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**: *37*

Diagnosed with Mental Illness: *0* **Diagnosed with Intellectual Disability**: *0*

Have Mobility Need: *21* **Have Physical Disability**: *1*

Inspections / Reviews

05/07/2025 Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *06/08/2025*

05/30/2025 - POC Submission

Submitted By: [redacted] **Date Submitted**: *06/03/2025*

Reviewer: [redacted] **Follow-Up Type**: *Document Submission* **Follow-Up Date**: *06/06/2025*

Inspections / Reviews *(continued)*

06/04/2025 Document Submission

Submitted By: [redacted] **Date Submitted:** *06/03/2025*

Reviewer: [redacted] **Follow Up Type:** *Not Required*

42b Abuse/Neglect

1. Requirements

2800.
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] at approximately 7:50 PM, resident [redacted] had an unwitnessed fall in [redacted] bedroom. The resident hit [redacted] call bell. Staff person A responded to the resident's call bell alarm and found the resident lying on the floor. Staff person A then notified staff person B of the incident. Staff person B assessed the resident. During the assessment, the resident reported having pain in [redacted] knees. The resident was given [redacted] for pain and transferred to [redacted] bed. Per interview with staff person B, the resident was not assessed for suspected fractures as required per the home's post-fall policy.

On [redacted] at approximately 7:00 AM, the resident complained of pain in [redacted] right leg while staff person C was transferring the resident from the bed to the resident's wheelchair. Staff person C then notified staff person D. Upon assessing the resident, staff person D observed the resident holding up [redacted] right leg, and the resident was unable to straighten [redacted] right leg. The resident was sent to the hospital, where the resident was diagnosed with a right hip fracture and had surgery to repair the fracture.

Plan of Correction ***Accept [redacted] - 05/30/2025)***

Corrective Actions Taken
On May 7, the facility updated its post-fall/medical concern documentation to include
1. Was the resident/POA asked if they wanted to be seen in the ER even when the pain is mild or nonspecific
2. Can the resident move all 4 extremities, and include the pain level for each extremity?
3. The updated post-fall checklist is included in every fall incident packet
All Resident Wellness Directors and Coordinators were educated on these changes on May 9; see the uploaded documentation.
The Managing Director or designee will conduct a weekly audit of all fall incidents for the next 60 days to monitor compliance. Ongoing falls will be discussed at the monthly Quality Improvement (QI) meeting.
On May 9, 2025, all Resident Wellness Directors and Coordinators received education on best practices for narrative documentation in progress notes following an incident, with an emphasis on conducting timely and thorough clinical assessments.
On May 14, 2025, a mandatory all-staff meeting was held to review the definitions of abuse and neglect in accordance with Department of Health Services (DHS) standards. See the uploaded documentation.
A review of this specific incident as a case study on how the failure to follow protocol may constitute neglect. Staff were encouraged to voice concerns, ask questions, and reaffirm their roles in protecting residents from harm.

Resident returned from rehabilitation following hip surgery and rehab and has since resumed [redacted] prior level of functioning. [redacted] is fully participating in activities of daily living and has expressed no ongoing pain or distress related to the incident.

On/28, the Managing Director and Resident Services Director met in person with the resident's Power of Attorney (POA) to discuss the fall incident, outcomes, corrective actions, and the resident's level of care. The POA expressed that [redacted] is pleased with the overall care the resident continues to receive and appreciates the facility's prompt

42b Abuse/Neglect (continued)

communication and transparency regarding the matter.

Licensee's Proposed Overall Completion Date: *05/29/2025*

Implemented [redacted] - 06/04/2025)