



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

Sent via email to: [REDACTED]  
MAILING DATE: August 20, 2014

Ms. Rose M. Handy, President  
Country Comfort Alternative Living Inc.  
10546 River Road  
New Columbia, Pennsylvania 17856

RE: Country Comfort Alternative Living, Inc.  
License #202050

Dear Ms. Handy:

As a result of the Department of Public Welfare's licensing inspection on July 30, 2014 the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

*Anne Graziano*  
Anne Graziano  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary



Violation Report: 20205 - 07/02/2014 - Yellenic, Cindy  
PCH Name: COUNTRY COMFORT ALTERNATIVE LIVING INC

1. REGULATION 55 Pa.Code §2600

2600.187(b) - The information in § 2600.187(a)(13) and § 2600.187(a)(14) shall be recorded at the time the medication is administered.

2a. DESCRIPTION OF VIOLATION

On July 27, 2014 Direct Care Staff Person A, prior to delivering Resident #1's evening medications, recorded in the Medication Administration Record that Resident #1 had already received their medication.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

1. Review correct procedure for administering medications with Direct Care Staff Person "A."
2. Make ~~sure~~ sure Direct Care Staff Person "A" understands that the Medication Administration Record should not be initialed until after the resident has taken their medications.
3. Review step #1 above with all direct care staff
4. Review step #2 above with all direct care staff
5. Continue doing Medication Administration observations with all direct care staff
6. The administrator shall monitor and assure ongoing compliance.

Above steps were completed on 8/15/14.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

Rose M. Handy

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page)


ROSE HANDY, ADMINISTRATOR

Date 8/19/14

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 8-20-14  
(Date)

Plan of correction implementation status as of 8-20-14  
(Date)

The above plan of correction was approved by   
(Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 20205 - 07/02/2014 - Yellenic, Cindy  
PCH Name: COUNTRY COMFORT ALTERNATIVE LIVING INC

1. REGULATION 55 Pa.Code §2600  
2800.187(d) - The home shall follow the directions of the prescriber.

2a. DESCRIPTION OF VIOLATION

Direct Care Staff Person A gave Resident #1 all evening medications at 8:30pm as indicated on the medication administration record. Resident #1 is prescribed Clonazepam 0.5mg tablet, to be given at 10pm. On July 27, 2014, this medication was administered to this resident 1 1/2 hours before the prescribed administration time. The prescribers orders were not followed.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

1. Review correct procedure for administering medications with Direct Care Staff person "A"
2. Make sure Direct Care Staff person "A" understands that medications should be given at prescribed time and that there is an hour allowance before and after the prescribed time that a medication can be given, not 1 1/2 hours before.
3. Review step #1 above with all direct care staff.
4. Review step #2 above with all direct care staff.
5. Continue doing Medication Administration observations with all ~~staff~~ direct care staff.
6. The Administrator shall monitor and assure ongoing compliance.

Above steps were completed on 8/15/14.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

Rose M. Handy

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page)

ROSE HANDY, Administrator

Date 8/19/14

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