



Sent via e-mail to: ccal@dejazzd.com
MAILING DATE: April 20, 2020

Ms. Rose Handy
President/Chief Executive Officer
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 Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on February 20, 2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Anne Graziano". The signature is fluid and cursive.

Anne Graziano
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: COUNTRY COMFORT ALTERNATIVE LIVING, INC.

License Number: 20205

Address: 10546 RIVER ROAD, NEW COLUMBIA, PA 17856

County: UNION

Region: NORTHEAST

Administrator:

Name: Rose Handy

Phone: 5705681090

Email: CCAL@DEJAZZD.COM

Legal Entity

Name: COUNTRY COMFORT ALTERNATIVE LIVING INC

Address: 10546 RIVER ROAD, NEW COLUMBIA, PA, 17856

Certificate(s) of Occupancy

Type: C-2 LP

Date: 05/31/1996

Issued By: L&I

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 20

Waking Staff: 15

Inspection

Type: Full

BHA Docket #:

Notice: Unannounced

Reason: Renewal

Inspection Dates and Department Representative

02/20/2020 - On-Site: Ryan Yankowy, Pam Harris

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 20

Residents Served: 20

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 8

Are 60 Years of Age or Older: 20

Diagnosed with Mental Illness: 1

Diagnosed with Intellectual Disability: 1

Have Mobility Need: 0

Have Physical Disability: 1

Rose M. Handy

4/7/2020

COUNTRY COMFORT ALTERNATIVE LIVING, INC.

20205

130e - Hearing Impairment

Regulations

2600.

130.e. If one or more residents or staff persons are not able to hear the smoke detector or fire alarm system, a signaling device approved by a fire safety expert shall be used and tested so that each resident and staff person with a hearing impairment will be alerted in the event of a fire.

Description of Violation

Interviews with staff and Resident #1 indicated that Resident #1 is unable to hear the fire alarm system. The home does not have a signaling device, approved by a fire safety expert and tested to ensure that resident #1 is alerted in the event of a fire.

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.)

Legal Entity Representative

Rose M. Handy

Signature

ROSE M. HANDY, ADMINISTRATOR 4/7/2020

Printed Name and Title

Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of

4-14-2020

(Date)

Plan of correction implementation status as of

4-14-2020

(Date)

The above plan of correction was approved by

ag

(Initials)

Implemented

Not Implemented

P 2A of 3

Country Comfort Alternative Living

20205

130e – Hearing Impairment

Plan of Correction*Why did it happen?*

Resident #1 was unable to hear the fire alarm because:

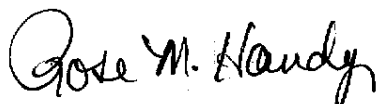
1. Her hearing has decreased.
2. She always keeps her room door closed. This combined with her decreased hearing contributes to her inability to hear the fire alarm horn that is outside her door in the hall.
3. She often wears headphones when watching her TV. This also decreases her ability to hear the fire alarm.

What was done to fix the problem?

1. All Personal Care staff were instructed to go to Resident #1's room first if the fire alarm sounds.
2. Cholin Corp., fire safety experts, were contacted on Friday, 02/21/2020, the day after the annual inspection. A meeting was scheduled for Monday, 02/24/2020.
3. On Friday, 02/28/2020, a horn/strobe was installed in Resident #1's room. A strobe light was installed in Resident #1's bathroom.
4. The alarm was tested twice to see if Resident #1 was able to hear the alarm with and without her headphones on. She was able to hear the alarm both times.

How do we prevent this from happening again?

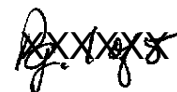
1. Whenever an unannounced fire drill is conducted, the person conducting the drill will meet with residents and staff after the drill to see if any residents had problems hearing the alarm or problems evacuating the building. The person conducting the drill, if not the administrator, will then meet with the administrator to discuss any problems.
2. If there were any problems, the administrator will work to find a solution to resolve the problems as soon as possible.



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4-14-2020



COUNTRY COMFORT ALTERNATIVE LIVING, INC.

20205

185a - Implement Storage Procedures

Regulations

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident #2's PRN 500mg Antacid Chew tablets were not available at the time of the inspection.

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.)

Legal Entity Representative

Rose M. Handy
Signature

ROSE M. HANDY ADMINISTRATOR
Printed Name and Title

4/7/2020
Date

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The above plan of correction is approved as of 4-14-2020
(Date)

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(Date)

The above plan of correction was approved by ag
(Initials)

Implemented
 Not Implemented

P 3A of 3

Country Comfort Alternative Living

20205

185a – Implement Storage Procedures

Why did it happen?

Resident #2's PRN 500mg Antacid chewable tablets were not available at the time of inspection because:

1. Resident #2's medication administration record stated she was to take two 500mg tablets by mouth as needed for upset stomach.
2. The home's supply stock for purchase only had a bottle of 1000mg tablets available.

What was done to fix the problem?

1. On 02/25/2020, Resident #2's doctor was faxed a request for permission to discontinue the PRN 500mg antacid tablets from her medication list since she has never requested them.
2. On 02/25/2020, Resident #2's doctor replied back to our faxed request stating the chewable tablets could be discontinued.

How do we prevent this happening again?

1. When the administrator or assistant administrator purchases OTC medication items as stock for purchase, they need to be sure the items are the correct strength for all residents who may need the items.
2. If families purchase OTC items, the administrator or assistant administrator will check the strength to be sure it matches the strength ordered by the resident's doctor.

Rose M. Handy

4/7/2020

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4-14-2020

Rose M. Handy