

Department of Human Services  
Bureau of Human Service Licensing

May 11, 2021

[REDACTED]  
ALC FAMILY CARE INC  
897 HOBBIE ROAD  
WAPWALLOPEN, PA 18660

RE: ALC FAMILY CARE  
897 HOBBIE ROAD  
WAPWALLOPEN, PA, 18660  
LICENSE/COC#: 22838

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/25/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Michele Moskalczyk  
Human Services Licensing Supervisor

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: ALC FAMILY CARE License #: 22838 License Expiration Date: 10/25/2020  
Address: 897 HOBBIE ROAD, WAPWALLOPEN, PA 18660  
County: LUZERNE Region: NORTHEAST

Administrator

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

Legal Entity

Name: ALC FAMILY CARE INC  
Address: 897 HOBBIE ROAD, WAPWALLOPEN, PA, 18660  
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: Other Date: 12/31/1981 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 14 Waking Staff: 11

Inspection

Type: Partial Notice: Unannounced BHA Docket #:  
Reason: Incident Exit Conference Date: 03/25/2021

Inspection Dates and Department Representative

03/25/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 18 Residents Served: 14

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 14 Are 60 Years of Age or Older: 12  
Diagnosed with Mental Illness: 14 Diagnosed with Intellectual Disability: 0  
Have Mobility Need: 0 Have Physical Disability: 0

## Inspections / Reviews

03/25/2021 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *05/07/2021*

5/4/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *05/07/2021*

5/11/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 224a - Preadmission Screen Form

**1. Requirements**

2600.

- 224.a. A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

**Description of Violation**

The preadmission screening form for resident #1 dated [REDACTED] does not indicate in Part III whether the home can meet the needs of the resident.

**Plan of Correction****Accept**

The home understands the importance of completing a preadmission screening 30 days prior to the resident being admitted. We understand that this will ensure that the home can safely meet a residents needs prior to the admission.

The homes administrator and designee will be sure to complete the preadmission screening 30 days prior to any new admissions. This will include all safety needs, fire safety needs, supervision, as well as health needs.

Completion Date: 04/01/2021

**Document Submission****Implemented**

The home will complete all three parts of the pre-admission screening to best determine if the resident's needs can be met in our facility.

## 227c - Support Plan Revision

**1. Requirements**

2600.

- 227.c. The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment.

**Description of Violation**

The current support plan for resident #1 dated 01/29/2021 was not updated to reflect the resident's supervision needs after the resident left the home on [REDACTED] and walked several miles to a nearby town. The resident's support plan indicated that the resident required no supervision, however, the resident, who has a diagnosis of dementia, did leave the grounds of the home on [REDACTED] without notifying staff and was brought back to the home by a [REDACTED] who had observed the resident wandering the town and peering into parked cars. The resident again walked away from the home on [REDACTED] and did not return until [REDACTED]. Staff did not address the resident's need for supervision in the current support plan after the incident on [REDACTED]

**Plan of Correction****Accept**

The home understands the importance of updating the support plan with resident's and their significant changes. This will ensure that each residents needs are being met as those needs change and that accountability for meeting those needs is firmly established. The administrator and designee will be sure to revise within 30 days upon completion of the annual assessment or upon changes in the residents needs as indicated on the current assessment.

Completion Date: 04/01/2021

Update - 05/04/2021

Please send/Attach updated RASP for resident #1.

## 227c - Support Plan Revision (continued)

## Document Submission

Implemented

██████████ was admitted to the ██████████ at ██████████ on ██████████.

3/28/2021 ALC staff had a meeting via phone conference with the ██████████ staff to discuss a discharge plan. All involved in the care of ██████████ felt in ██████████ best interest that ██████████ not return to the facility. Everyone agreed that a secured dementia area would be a safer place for ██████████ given the worsening of ██████████ dementia diagnosis.