

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

December 22, 2022

[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 10/18/2022 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: ALC FAMILY CARE **License #:** 22838 **License Expiration:** 10/25/2023
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:** PA L&I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 16 **Waking Staff:** 12

Inspection Information

Type: Full **Notice:** Unannounced **BHA Docket #:**
Reason: Renewal **Exit Conference Date:** 10/18/2022

Inspection Dates and Department Representative

10/18/2022 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 18 **Residents Served:** 16

Secured Dementia Care Unit

In Home: No **Area:** **Capacity:** **Residents Served:**

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 10 **Are 60 Years of Age or Older:** 10
Diagnosed with Mental Illness: 16 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 0 **Have Physical Disability:** 0

Inspections / Reviews

10/18/2022 - Full

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 12/18/2022

12/20/2022 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 12/20/2022
Reviewer: [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 12/26/2022

Inspections / Reviews *(continued)*

12/22/2022 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/20/2022

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

103f - Refrigerator/Freezer Temps

1. Requirements

2600.

103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

Description of Violation

The Wenic brand Refrigerator-Freezer, the thermometer located in the refrigerator unit measured 48°F.

Repeat Violation 8/19/21

Plan of Correction

Accept (████) - 12/20/2022)

The home understands the importance of this regulation that it ensures that foods are stored at a safe temperatures. The administrator has been tracking the temperatures on this refrigerator and will continue to monitor the temperatures and the temperature control button. Maintenance staff replaced the rubber seal. The temperature log will be ongoing.

Licensee's Proposed Overall Completion Date: 12/19/2022

Implemented (████) - 12/22/2022)

132f - Alternate Exit Routes

2. Requirements

2600.

132.f. Alternate exit routes shall be used during fire drills.

Description of Violation

The home did not identify the exit routes used during their fire drills held from 11/2021 thru 9/2022.

Plan of Correction

Accept (████) - 12/20/2022)

The home understands the importance of this regulation in varying the location of the fire and exit routes used. It ensures that staff and residents are prepared to respond to different fire scenarios. Administrator conducted a training on 12/12/2022 with designee staff discussing the importance of this regulation. Administrator will ensure to identify the exit routes used during fire drill on the fire drill log. Administrator will sign off of the fire drill document to ensure designee's are identifying the the exit route used during that drill.

Licensee's Proposed Overall Completion Date: 12/19/2022

Implemented (████) 12/22/2022)

144c1 - Smoking Area Guidelines

3. Requirements

2600.

144.c. A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures that include the following:

144c1 - Smoking Area Guidelines (continued)

- 1. Proper safeguards inside and outside of the home to prevent fire hazards involved in smoking, including providing fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the home, extinguishing procedures, fire resistant furniture both inside and outside the home and fire extinguishers in the smoking rooms.

Description of Violation

The home's designated smoking area had 3 fabric cushions and a fabric stadium chair that were not fire resistant located in the smoking area.

Plan of Correction

Accept [redacted] - 12/20/2022)

The home understand the importance of this regulation and that it greatly reduces the risk of fire in a personal care home.

Maintenance staff removed all non fire resistant furniture and cushions from inside the smoking area, and replaced them with fire resistant furniture.

Administrator conducted a resident meeting on 12/14/2022 discussing this regulation and the importance of following its guidelines.

Administrator and designee staff created a monitoring log. Administration will conduct checks weekly (every Friday) on the smoking area to ensure residents are not placing fabric cushions on the chairs.

Licensee's Proposed Overall Completion Date: 12/19/2022

Implemented [redacted] - 12/22/2022)