

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

January 10, 2023

[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 11/30/2022 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: *PALI*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *15* Waking Staff: *11*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint* Exit Conference Date: *11/30/2022*

Inspection Dates and Department Representative

11/30/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *18* Residents Served: *15*

Secured Dementia Care Unit
 In Home: *No* Area: Capacity: Residents Served:

Hospice
 Current Residents: *0*

Number of Residents Who:
 Receive Supplemental Security Income: *11* Are 60 Years of Age or Older: *8*
 Diagnosed with Mental Illness: *15* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

11/30/2022 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/17/2022*

12/20/2022 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *01/09/2023*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/23/2022*

Inspections / Reviews *(continued)*

12/22/2022 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/09/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 12/27/2022

01/10/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/09/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

54a - Direct Care Staff

1. Requirements

2600.

54.a. Direct care staff persons shall have the following qualifications:

2. Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry.

Description of Violation

Direct Care Staff Member A was hired [REDACTED]/2022. The home has no verification that the staff member has a High School Diploma, GED, or is actively registered as a CNA in the PA registry.

Plan of Correction

Accept [REDACTED] - 12/22/2022)

The home understands the importance of this regulation and that it ensures direct care staff persons have the education and ability required to perform job duties specified by the home, including ADL's.

Administrator is currently assisting this direct care staff member to retrieve a copy of [REDACTED] high school diploma from the private school [REDACTED] attended in Maryland. Waiting for a call/fax back from the school.

The administrator will ensure that all new hires provide the home with a copy of their high school diploma, GED, or is actively registered as a CNA in the PA registry. Administrator created a check list to ensure that the required documents are in the new hires file.

Licensee's Proposed Overall Completion Date: 01/31/2023

Implemented [REDACTED] - 01/10/2023)

185a - Implement Storage Procedures

2. Requirements

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

On [REDACTED]/2022, the glucometer for resident 1 indicated a blood sugar level of [REDACTED] at [REDACTED] am. The MAR was documented incorrectly as [REDACTED] for the corresponding time.

Plan of Correction

Accept [REDACTED] - 12/22/2022)

The home understands the importance of this regulation and that it reduces the risks of medications and medical equipment misplaced, lost or misused.

Administrator conducted a staff training on 12/14/2022 and reviewed the homes policy and procedures on the medication administration.

The administrator and designee will monitor the MAR to ensure that medication technicians are documenting the BS numbers according to the glucose meter.

Attached is the training document that was conducted with DCS.

Licensee's Proposed Overall Completion Date: 12/20/2022

Implemented [REDACTED] - 01/10/2023)