

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

July 26, 2023

[REDACTED], ADMINISTRATOR  
COUNTRY COMFORT ALTERNATIVE LIVING INC  
10546 RIVER ROAD  
NEW COLUMBIA, PA, 17856

RE: COUNTRY COMFORT ALTERNATIVE  
LIVING, INC.  
10546 RIVER ROAD  
NEW COLUMBIA, PA, 17856  
LICENSE/COC#: 20205

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/06/2023 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:** COUNTRY COMFORT ALTERNATIVE LIVING, INC      **License #:** 20205      **License Expiration:** 05/26/2024

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

**County:** UNION      **Region:** NORTHEAST

**Administrator**

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

**Legal Entity**

**Name:** COUNTRY COMFORT ALTERNATIVE LIVING INC

**Address:** [REDACTED]

**Phone:** [REDACTED]      **Email:** [REDACTED]

**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 Information**

**Type:** Full      **Notice:** Unannounced      **BHA Docket #:**

**Reason:** Renewal      **Exit Conference Date:** 06/06/2023

**Inspection Dates and Department Representative**

06/06/2023 On Site [REDACTED]

**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:** 0      **Diagnosed with Intellectual Disability:** 0

**Have Mobility Need:** 0      **Have Physical Disability:** 0

**Inspections / Reviews**

**06/06/2023 - Full**

**Lead Inspector:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 07/08/2023

**07/10/2023 - POC Submission**

**Submitted By:** [REDACTED]      **Date Submitted:** 07/25/2023

**Reviewer:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 07/14/2023

Inspections / Reviews *(continued)*

07/17/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 07/25/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 07/21/2023

07/26/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/25/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

16c - Written Incident Report

1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department’s personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On [REDACTED]/22, Resident #1 fell in Resident room but was unable to get up with the assistance of staff. 911 was called. Resident sustained a broken femur. It was not reported to the Department until [REDACTED]/22.

Plan of Correction

Accept ([REDACTED] - 07/17/2023)

Administrator will review Regulation 2600.16.c with Administrative Assistant and all Personal Care Aids. Administrator will also review Country Comfort's "Reportable Incidents and Conditions to DHS" policy with Administrative Assistant and all Personal Care Aids. Policy states the 24-hour requirement to report to DHS and whose responsibility it is to do the reporting. All Reportable Incidents should immediately be reported to the Administrator or Administrative Assistant once the incident is under control so a report can be made to DHS within 24 hours. Administrator will be responsible for monitoring the policy and procedure to assure it is being followed correctly.

Licensee's Proposed Overall Completion Date: 07/21/2023

Implemented ([REDACTED] - 07/26/2023)

26b - Quality Management Plan Content

2. Requirements

2600.

26.b. The quality management plan shall address the periodic review and evaluation of the following:

Description of Violation

The homes policy is to review the quality management plan annually. The last review of the quality management plan was on 3/2/22.

Plan of Correction

Accept ([REDACTED] - 07/10/2023)

Administrator will review Regulation 2600.26.b with Administrative Assistant and assign it on their monthly list of responsibilities to review and do written documentation annually if not necessary before then. Administrator will meet with Administrative Assistant quarterly to see if the quality management plan is being reviewed.

Licensee's Proposed Overall Completion Date: 07/08/2023

Implemented ([REDACTED] - 07/26/2023)

103i - Outdated Food

3. Requirements

2600.

103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation

Located in the freezer in the storage shed was a 2 pound bag of broccoli, a 2 pound bag of winter mix, and a 2 pound bag of corn that did not have expiration dates.

Plan of Correction

[REDACTED] - 07/10/2023)

Administrator will review Regulation 2600.103.i with all kitchen staff and Administrative Assistant. Freezers and

**103i - Outdated Food (continued)**

refrigerator will be checked monthly by the full time day shift kitchen person to assure food is marked properly according to regulation 2600.103.i. Administrator will do periodic checks to make sure the regulation is being followed.

Licensee's Proposed Overall Completion Date: 07/12/2023

Implemented (████) - 07/26/2023)

**132c - Fire Drill Records****4. Requirements**

2600.

132.c. A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

**Description of Violation**

On 5/15/23, a fire drill was held. 18 residents were in the home but only 17 were evacuated.

**Plan of Correction**

Accept (████) - 07/10/2023)

18 residents did evacuate but a clerical error was made when the Administrative Assistant documented the drill. Administrator will emphasize to the Administrative Assistant the importance of reviewing documentation to assure it is correct. Administrator will also review the documentation monthly.

Licensee's Proposed Overall Completion Date: 08/01/2023

Implemented (████) - 07/26/2023)

**182b - Prescription Medication****5. Requirements**

2600.

182.b. Prescription medication that is not self-administered by a resident shall be administered by one of the following:

**Description of Violation**

Staff person B completed the initial MedTech training on 4/24/07. The annual re-certification only included 1 medication administration record review, one medication administration observation, and is not certified with a date or signature of the trainer for training year 2022.

The summary and certification form for Staff person C was not filled out. It was missing staff person C's name, original certification date, completion date, recertification, trainers' signature, date, and providers name.

**Plan of Correction**

Accept (████) - 07/17/2023)

The Administrator will complete the addition medication administration record review and medication administration observation of Staff person B so that person will be certified as a Medication Administrator. The Administrator will complete the form for Staff person C so that person will have the completed form for certification.

Administrator will review the annual re-certification forms for medication administration record review and medication administration observation with the Administrative Assistant who is a certified Medication Administration Trainer. The Administrator will observe the Administrative Assistant when they are doing a record review and medication administration observation.

182b - Prescription Medication (continued)

The Administrator and Administrative Assistant will complete a calendar of when each Personal Care Aid needs to have a medication administration record review, a medication administration observation and who will complete it in order for the personal care staff to receive their annual re-certification.

Licensee's Proposed Overall Completion Date: 08/01/2023

Implemented (████) - 07/26/2023)

185a - Implement Storage Procedures

6. 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

The Medication Administration record of Resident 2 indicated that they had a blood glucose level of █████ at █████ pm on █████/2023. Their Glucometer reading for this date and time was 168.

Plan of Correction

Accept (████) - 07/10/2023)

The Administrator will review with personal care aid staff how to get the blood sugar readings from each glucometer. Accuracy will be emphasized since some residents get insulin and/or medication according to their blood glucose reading.

Administrator will do a monthly check of each resident's documentation and their glucometer readings.

Licensee's Proposed Overall Completion Date: 08/01/2023

Implemented (████) - 07/26/2023)