

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

July 16, 2024

[REDACTED], OWNER  
ALLIANCE SENIOR HOME LLC  
[REDACTED]

RE: ALLIANCE SENIOR HOME  
104 PENNSYLVANIA AVENUE  
MATAMORAS, PA, 18336  
LICENSE/COC#: 22733

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/11/2024 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]

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: *ALLIANCE SENIOR HOME* License #: *22733* License Expiration: *06/26/2025*  
 Address: *104 PENNSYLVANIA AVENUE, MATAMORAS, PA 18336*  
 County: *PIKE* Region: *NORTHEAST*

**Administrator**

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

**Legal Entity**

Name: *ALLIANCE SENIOR HOME LLC*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *R-4* Date: *02/20/2018* Issued By: *Matamoras Borough*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *7* Waking Staff: *5*

**Inspection Information**

Type: *Full* Notice: *Unannounced* BHA Docket #:  
 Reason: *Renewal, Incident* Exit Conference Date: *06/11/2024*

**Inspection Dates and Department Representative**

06/11/2024 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *8* Residents Served: *5*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *0*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *5*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *2* Have Physical Disability: *1*

**Inspections / Reviews**

**06/11/2024 - Full**

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *07/04/2024*

**07/08/2024 - POC Submission**

Submitted By: [REDACTED] Date Submitted: *07/16/2024*  
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *07/13/2024*

Inspections / Reviews *(continued)*

07/16/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/16/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

81b - Resident Personal Equipment

1. Requirements

2600.

81.b. Wheelchairs, walkers, prosthetic devices and other apparatus used by residents must be clean, in good repair and free of hazards.

Description of Violation

Resident # 2 uses a bedside mobility device. The resident's Resident Assessment Support Plan dated does not reflect the specific need for the device, the intended use, any risks associated with the device, the resident's ability to use the device safely for the intended purpose, identification of the specific device to be used and if a cover is required to meet FDA guidelines.

Plan of Correction

Accept ( ) - 07/08/2024)

The regulation was violated because the facility did not have a protocol in place for the resident bed [redacted]

The regulation

The resident's bedside [redacted] will only uses whenever the resident needs [redacted], only for support to allow [redacted]

The Administrator ordered a protector for the bed [redacted], which it will be used to protect the resident from harm; the order will be delivering by July 16, 2024.

Resident was assessed and the result is that the [redacted] needs it to help support [redacted] body [redacted] [redacted] will be use only for support the resident [redacted]. It will not be use as any forms of keep the resident on bed or restraint.

The administrator will make sure that the bed [redacted] will be uses only when the resident is [redacted]

To prevent future violation the facility will comply with the bed [redacted] requirement the according to the regulation 2800.203. And the Doctor order which we have on file.

Licensee's Proposed Overall Completion Date: 07/04/2024

Implemented ( ) - 07/16/2024)

101j7 - Lighting/Operable Lamp

2. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

Resident #1 does not have access to a source of light that can be turned on/off at bedside.

Plan of Correction

Accept ( ) - 07/08/2024)

The regulation was violated because room number [redacted] the light was not working.

The regulation was corrected during the inspector was in the facility, a new light bulbs was put on it.

To prevent future violation resident's bedside light will be check every morning by staff to check for operative to make sure that overnight is working correct and comply with the regulation

The administrator will be responsible to check after staff to make sure that all bedroom's light are working correct.

## 101j7 - Lighting/Operable Lamp (continued)

Licensee's Proposed Overall Completion Date: 07/04/2024

Implemented ( ) - 07/16/2024

## 103i - Outdated Food

## 3. Requirements

2600.

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

## Description of Violation

*One egg was placed on the inside shelf of the kitchen refrigerator that was not labeled with a date of expiration.*

## Plan of Correction

Accept ( ) - 07/08/2024

*The regulation was violated because staff neglected to leave one egg in the original container instead place it inside shelf of the kitchen refrigerator that was not labeled with a date of expiration.*

*The regulation was corrected during inspector was in the kitchen, the eggs was place in the garbage. Moving forward all eggs and other food will be stay in the original containers where is labeled, and others food has been and will continue labeled and date on sealer containers.*

*To prevent future violation a reminder note is placed on the refrigerator indicating that food that can be in the original containers must stay with expiration, labeled date and sealed. On Staff were retraining about the food in the refrigerator and general opens food items must be date, labeled, dated and closed.*

*Every staff that dealing with food in the kitchen are responsible to check every day for all food be labeled, date and sealed.*

*The administrator will check the kitchen, and refrigerator temperature, unlabeled, date, expiration and other items that can put the resident at risk of eating out date foods.*

Licensee's Proposed Overall Completion Date: 07/04/2024

Implemented ( ) - 07/16/2024

## 141a - Medical Evaluation

## 4. Requirements

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission.

## Description of Violation

*Resident #1 was admitted to the home on ( ) but the medical assessment was not signed until ( )*

## Plan of Correction

Accept ( ) - 07/08/2024

*§ 2600.141. Resident medical evaluation and health care.*

*The 2600.141 was violated because the assessment was not signed within 60 days prior to admission or within 30 days after admission*

*Moving forward resident's assessment; the facility will request the assessment to be sign before the resident move in to the facility, if is not possible its must be done 60 days prior to admission or within 30 days after admission*

*For residents that are already admitted in the facility the administrator will take the assessment to the resident's*

**141a - Medical Evaluation (continued)**

doctor and will wait for it until is signed, if the doctor is not able to sign that day administrator or other designed staff will go to the doctor office and requested the document to be sign with within 60 days prior to admission or within 30 days after admission.

Each resident's doctor will receive a copy of the regulation§ 2600.141 with the assessment to ensure that the doctor understand that the facility needs to comply with the regulation.

To prevent future violation the administrator or designed staff will go to the doctor office every time it needs it, in order to have the document sign by a doctor to comply with the regulation§ 2600.141.

The administrator will be responsible that all assessment be signed during the established time. The administrator will get in touch with the resident's doctor to make sure that the facility will have on file the assessment signed according to the 2600.141.

Licensee's Proposed Overall Completion Date: 07/04/2024

Implemented (█) - 07/16/2024)

**183d - Prescription Current****5. Requirements**

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

**Description of Violation**

On 6/11/24 the home's medication cart contained a prescription of █ for resident # 1. The expiration date of the medication was listed as 2/28/23.

On 6/11/24 the home's medication cart contained a prescription of █ for resident # 1. The expiration date of the medication was listed as 3/31/24.

**Plan of Correction**

Accept (█) - 07/08/2024)

On 6/11/24 the home's medication cart contained a prescription of █ █ for resident # 1. The expiration date of the medication was listed as 3/31/24.

The regulation was violating because the inspector found two medications that were expired.

The regulation was violated because the administrator and CMA neglected to check for this resident expired medications.

The regulation was corrected on 05/12/2024 doctor sent to the pharmacy new prescriptions for █ █ (changed order). █; the facility already have in the facility with the expatriation date 03/31/2026.

To prevent future violation the administrator will check for expired medication at least one at month. When the medication is near expiration date it will be highlight as reminder that it will be expired soon.

It will be a check list on the MAR to check for medication expiration date each month.

Licensee's Proposed Overall Completion Date: 07/04/2024

Implemented (█) - 07/16/2024)