

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

December 6, 2024

[REDACTED]  
ALLIANCE SENIOR HOME LLC  
[REDACTED]  
[REDACTED]

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

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/20/2024, 11/18/2024 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:** 02/20/2017 **Issued By:** Matamoras Borough

**Staffing Hours**

**Resident Support Staff:** 0 **Total Daily Staff:** 9 **Waking Staff:** 7

**Inspection Information**

**Type:** Partial **Notice:** Unannounced **BHA Docket #:**  
**Reason:** Incident **Exit Conference Date:** 11/20/2024

**Inspection Dates and Department Representative**

11/20/2024 - On-Site: [REDACTED]  
 11/18/2024 - Off-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 8 **Residents Served:** 7

**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:** 0  
**Diagnosed with Mental Illness:** 0 **Diagnosed with Intellectual Disability:** 0  
**Have Mobility Need:** 2 **Have Physical Disability:** 1

**Inspections / Reviews**

11/20/2024 Partial

**Lead Inspector:** [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 12/05/2024

Inspections / Reviews *(continued)*

12/06/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/06/2024

Reviewer: [REDACTED]

Follow Up Type: *Bypass Document Submission*

12/06/2024 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/06/2024

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

225a - Assessment 15 Days

1. Requirements

2600.

225.a. A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

Description of Violation

During [redacted] offsite investigation, it was discovered that Resident [redacted] was admitted to the home on [redacted]. The resident's initial assessment was not completed until 1/15/2024, exceeding the required timeframe

Plan of Correction

Accept [redacted] - 12/06/2024)

The Initial assessment was not done within 15 days of a resident admission. This incident ended up leading to the violation of regulation number 2600.225a.

The initial assessment is one of the most important forms a facility has on a resident and not doing it right could cause serious problems such as complications, issues with the quality of care, and planning for the resident.

The regulation was not corrected with this resident because we cannot make another assessment. His cancer has progressed on him, and the facility cannot provide for his care any longer. Therefore, he was discharged from the facility on November 20, 2024. The resident went to the highest level of care facility.

Moving forward all Initial assessments will be done within 15 days of admission of a resident.

The Administrator already has a form in place of each resident's file. The form states the when the D.M.E.s and R.A.S.P.s were done.

The Administrator will make sure that the initial assessment is done within 15 days of admission. The assessment will be done after the resident has had their screening done.

Licensee's Proposed Overall Completion Date: 12/05/2024

Implemented [redacted] - 12/06/2024)

227d - Support Plan Medical/Dental

2. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

During [redacted] offsite investigation, it was discovered that Resident [redacted] Assessment and Support Plan, dated [redacted], was incomplete and did not document the resident's supervision or mobility needs.

Plan of Correction

Accept [redacted] - 12/06/2024)

The facility violated the regulation 2600.227(d) because the Administrator unintentionally ignored parts of the R.A.S.P. where it states supervision needs and mobility needs of the resident.

**227d Support Plan Medical/Dental (continued)**

*The R.A.S.P. was filled out incorrectly. Specifically, the Administrator did not check the R.A.S.P. correctly when filling it out.*

*The Administrator is unable to correct this particular RASP because the resident was discharged on 11/20/24. The facility cannot provide for his needs anymore due to the fact that the resident was placed on a feeding tube.*

*The plan to correct past mistakes is to make sure all new R.A.S.P.s are filled out correctly.*

*Moving forward all R.A.S.P.s will be double checked to make sure that no section is left without documentation. The Administrator will use the support plan check list to make sure that all Support plans are completed according to the regulation 2600.227(d).*

*To prevent future violations, the Administrator will double check the R.A.S.P.s if necessary to make sure all sections of the R.A.S.P. is completed according to the regulation. In short, the administrator is responsible to make sure that all sections of the Support plan are correctly documented. The Administrator will use the R.A.S.P. check list to check each resident's R.A.S.P. so that each page is correctly documented.*

**Licensee's Proposed Overall Completion Date: 12/05/2024**

**Implemented [REDACTED] - 12/06/2024)**