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

July 13, 2026

[redacted] PRESIDENT
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 06/03/2026 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**: *COUNTRY COMFORT ALTERNATIVE LIVING, INC.* **License #**: *20205* **License Expiration**: *05/26/2027*

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

**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**: *18* **Waking Staff**: *14*

## Inspection Information

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

**Reason**: *Renewal* **Exit Conference Date**: *06/03/2026*

## Inspection Dates and Department Representative

*06/03/2026 - On-Site:* [redacted]

## Resident Demographic Data as of Inspection Dates

### General Information

**License Capacity**: *20* **Residents Served**: *18*

### Secured Dementia Care Unit

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

### Hospice

**Current Residents**: *0*

### Number of Residents Who:

**Receive Supplemental Security Income**: *4* **Are 60 Years of Age or Older**: *18*

**Diagnosed with Mental Illness**: *1* **Diagnosed with Intellectual Disability**: *1*

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

# Inspections / Reviews

### 06/03/2026 Full

**Lead Inspector**: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *06/21/2026*

### 07/08/2026 - POC Submission

**Submitted By**: [redacted] **Date Submitted**: *07/11/2026*

**Reviewer**: [redacted] **Follow-Up Type**: *Document Submission* **Follow-Up Date**: *07/13/2026*

## Inspections / Reviews *(continued)*

**07/13/2026 Document Submission**

**Submitted By:** [redacted] **Date Submitted:** *07/11/2026*

**Reviewer:** [redacted] **Follow Up Type:** *Not Required*

## 82c - Locking Poisonous Materials

**1. Requirements**

2600.
82.c. Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

**Description of Violation**

*At approximately 11:03 a.m., Dermasil Eczema Relief Body Lotion with a manufacture's label indicating " In case of accidental ingestion, seek professional assistance or contact a Poison Control Center immediately ", was unlocked, unattended, and accessible in the bathroom of resident #1, who has been assessed not capable of recognizing and using poisons safely.*

**Plan of Correction** ***Accept ([redacted] - 06/30/2026)***

*On 06/04/2026, Personal Care Aides searched all resident rooms with the resident present. All potentially poisonous items were removed. Lotions were labeled and locked in the shower room closet. Other items were returned to the families or disposed. All personal care aides and residents were spoke to individually concerning regulation 2600.82.c. and what needs to be followed. Personal Care Aides will continue to monitor resident rooms. On 6/10/2026, letters were sent to all families. A copy of the letters sent are attached.*

**Licensee's Proposed Overall Completion Date:** *06/29/2026*

***Implemented ([redacted] - 07/13/2026)***

## 132g - Fire Drills Days/Times

**2. Requirements**

2600.
132.g. Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

**Description of Violation**

*The home routinely conducts sleeping hour drills between the hours of 6:00 a.m. and 6:45 a.m. as evidenced by the following fire drills: 4/16/25 at 6:35 a.m., 10/22/25 at 6:35 a.m., and 4/22/26 at 6:15 a.m. Only the fire drill conducted on 5/24/25 at 11:10 p.m. was conducted outside of those hours.*
*Repeated violation 4/30/25.*

**Plan of Correction** ***Accept ([redacted] - 06/30/2026)***

*Administrative Assistant has been running third shift fire drills. I, the administrator, reviewed the violation with [redacted] on 06/04/2026 and will coordinate all future third shift fire drills with [redacted] We ran a successful third shift drill on 06/19/26 at 4:25am.*

**Licensee's Proposed Overall Completion Date:** *06/29/2026*

***Implemented ([redacted] - 07/13/2026)***

## 183b - Meds and Syringes Locked

**3. Requirements**

2600.
183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

## 183b Meds and Syringes Locked *(continued)*

**Description of Violation**

*At 9:25 a.m., a bottle of Colace tablets was unlocked, unattended, and accessible in the side shelf of the medication administration cart.*

**Plan of Correction** ***Accept ( - 06/30/2026)***

*A Personal Care Aide found the colace in a resident's room on 06/03/2026. [redacted] knew the resident was not allowed this medication in [redacted] room nor was it a prescribed medication for them. [redacted] put it on the cart with the intention of placing it on the administrator's desk. [redacted] got distracted when putting the cart away and forgot about the colace. This violation was reviewed with all aides on 06/04/2026 along with a discussion on ways to prevent this violation from happening again. They were told to lock the med in the med cart until it can be put on the administrator's desk or put the bottle in their pocket until it can be locked in the cart and put on the admin's desk.*

**Licensee's Proposed Overall Completion Date:** *06/29/2026*

***Implemented ( - 07/13/2026)***

## 183e - Storing Medications

**4. Requirements**

2600.
183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

**Description of Violation**

*At 12:15 p.m. a bottle of Tylenol belonging to resident #2 that expired 4/2026 was found in the medication cart. Repeated violation 4/30/25.*

**Plan of Correction** ***Accept ( - 06/30/2026)***

*On 06/05/2026, a Personal Care Aide was assigned the responsibility of checking for expired medications, CAM, and syringes. [redacted] is to write the expiration date on the OTC bottles, tubes, inhalers, and syringes so it can be seen easily by all personal care aides. [redacted] is also to keep a record of meds that are to expire within the month so they can be removed by a backup aide if [redacted] is not available to remove it. Expiration sheet will be posted. Expiration Sheet is attached.*

**Licensee's Proposed Overall Completion Date:** *06/29/2026*

***Implemented ( - 07/13/2026)***

## 185a - Implement Storage Procedures

**5. 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**

*Resident #3 requires blood glucose monitoring at lunch, supper, and bedtime. On 5/28/26 at lunch time the resident's blood glucose was 162, but was recorded on the medication administration record as 167.*
*The glucometer belonging to resident #3 was not calibrated to the correct time.*

## *185a - Implement Storage Procedures (continued)*

*Resident #3 is prescribed Bisacodyl EC 5mg, one tablet daily as needed, and Deep Sea (Ocean) .65% Nose spray, 1 spray into each nostril as needed. These medications were not available in the cart to be administered if needed.*

**Plan of Correction** ***Accept ( - 06/30/2026)***

*As well as recording blood sugars on the QuickMar (medication computer application), a record sheet will be kept daily by all Personal Care Aides to record monitor date, monitor time, resident's name, blood sugar count and initials of Personal Care Aide doing the vital starting on 06/29/2026. At the end of second shift, the record sheet will then be placed on the Administrative Assistant's desk for review. Blood Sugar Sheet is attached.*
*The second 185.a. violation was reviewed with the Administrative Assistant who is in charge of ordering medications. Thus, if an expired PRN medication is put on desk, needs to get a new script for it or a discontinued order from the doctor. did get a discontinued order for the unavailable medications for resident #3. Discontinued order is attached.*

**Licensee's Proposed Overall Completion Date:** *06/29/2026*

***Implemented ( - 07/13/2026)***

## 187d - Follow Prescriber's Orders

**6. Requirements**

2600.
187.d. The home shall follow the directions of the prescriber.

**Description of Violation**

*Resident #2 is prescribed Triamterene-Hydrochlorothiazide 25mg, one capsule daily with an order to hold the medication if the Systolic Blood Pressure (SBP) is below 120. On 5/7/26 at 9:00 a.m. the resident's SBP was 112 and on 5/30/26 at 9:00 a.m. the resident's SBP was 114. The medication was not held as per the prescriber's orders on these dates.*
*Repeated violation 4/30/25.*

**Plan of Correction** ***Accept ( - 06/30/2026)***

*On 06/09/2026, this violation was reviewed with all Personal Care Aides. We currently have two residents that have guidelines to follow if the SBP is below a certain level. All Personal Care Aides are to review the SBP number with a supervisor or administrator for the next month before giving or holding the resident's medication. After the month, the Administrative Assistant will review the medication records weekly to make sure the orders are being followed properly.*

**Licensee's Proposed Overall Completion Date:** *06/29/2026*

***Implemented ( - 07/13/2026)***