



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE  
PO BOX 2675  
HARRISBURG, PENNSYLVANIA 17102-1810

ADULT RESIDENTIAL LICENSING  
Central Region Field Office  
1401 North 7<sup>th</sup> Street  
Harrisburg, Pennsylvania 17102-1810

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July 16, 2010

Mr. Lorin A. Croce, President/CEO  
The Village of Nanty Glo PCH, Inc.  
The Village of Nanty Glo PCH  
628 Pike Road  
Johnstown, Pennsylvania 15909

Dear Mr. Croce:

As a result of the Department of Public Welfare's licensing inspection on June 12, 2010 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

Sincerely,

A handwritten signature in cursive script that reads "Michele Strauser / ebs".

Michele Strauser  
Regional Licensing Administrator

Enclosure  
Violation Report

**VIOLATION REPORT  
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

NAME AND ADDRESS OF PERSONAL CARE HOME The Village of Nanty Glo Personal Care Home 628 Pike Road; Johnstown, PA. 15909		CURRENT LICENSE NUMBER 1 325696	
INSPECTION DATE(S) (Include all dates of the inspection) 6/12/10		REGIONAL REPRESENTATIVE D. McConnell	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Janet L. Haberkorn RD/CHA</i>			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Janet L. Haberkorn RD/CHA</i>	DATE <i>6/23/10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE <i>7/6/10</i>

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (Include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
121a Stairways, hallways, doorways, passageways and egress routes from rooms and from the building shall be unlocked and unobstructed.  FCH Division Central Region Field Office	Fire exit doorways were obstructed. The fire exit doors at the end of the hallways near resident bedrooms #102 and #124 were blocked by a mesh banner that had a stop sign.	<i>6/12/10</i>	<i>The mesh banners secured by Velcro were immediately removed and discarded The Staff responsible for ordering equipment has been educated on proper use and regulations pertaining to safety devices. The exits were observed by DPW Surveyor on 6/28/10</i>	

**RECEIVED**

**VIOLATION REPORT  
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> The Village of Nanty Glo Personal Care Home 628 Pike Road; Johnstown, PA. 15909	<b>CURRENT LICENSE NUMBER</b> 325690
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<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> 6/12/10	<b>REGIONAL REPRESENTATIVE</b> D. McConnell
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**PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)**

*Janet L Heberborn*

<b>SIGNATURE OF LEGAL ENTITY REPRESENTATIVE</b> <i>Janet L Heberborn RDPCA</i>	<b>DATE</b> 6/30/10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> <i>MES</i>	<b>DATE</b> 7/6/10
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1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
183b 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.	The following medications were found on top of the unsupervised medication cart, unsecured and assessable to the residents in the dining room: <ul style="list-style-type: none"> <li>Seven unidentified medications in a medication cup labeled Vic.</li> <li>Advair for resident #1</li> <li>Insulin vials for residents #2 and #3.</li> </ul>	6/25/10	Current Staff has been re-educated in HIPPA and the proper way of medication administration. The staff member responsible was disciplined and is no longer employed @ this facility.	Steps have been taken to correct violation; full compliance is not verifiable <u>7/6/10</u> <i>MES</i> Date Initials (DPW)

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