



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

AUG 30 2010

PHONE: (717) 783-3670
FAX: (717) 783-5662

Sister Joachim Anne Ferenchak, Administrator, CEO
Garvey Manor Nursing Home
Our Lady of the Alleghenies Residence
1037 South Logan Boulevard
Hollidaysburg, Pennsylvania 16648

Dear Sister Ferenchak:

As a result of the Department of Public Welfare's licensing inspection on July 15, 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.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,

A handwritten signature in black ink that reads "Kevin T. Casey". The signature is written in a cursive style with a large initial "K" and a stylized "T" and "C".

Kevin T. Casey
Deputy Secretary

Enclosures
License
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME Our Lady of the Alleghenies Residence; 1037 South Logan Blvd. Hollidaysburg, PA 16648		CURRENT LICENSE NUMBER 316410	
INSPECTION DATE(S) (Include all dates of the inspection) 7/15/10		REGIONAL REPRESENTATIVE D. McConnell, M. Palermo	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) Linda Sell, Director of Our Lady of the Alleghenies Residence			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Linda Sell</i>	DATE 8/10/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cybil Boring</i>	DATE 8/19/10

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
18 A home shall comply with applicable Federal, State and local laws, ordinances and regulations.	The inspection certificates for boiler #NB6449 and #NB6450 have expiration dates of 5/5/10.	07/28/2010 Ongoing	Immediate Correction: Director of Maintenance contacted CNA Boiler and Machine on 7/16/10 alerting them that the boilers listed had expired certificates. Inspection occurred 7/28/10 and re-certification was received. See Attachment A. Long Term Compliance and Quality Assurance: Director of Maintenance will create a file logging the dates inspection is due. Will contact CNA Boiler and Machine 30 days prior to expiration. File reviewed every May.	8/19/10 <i>CB</i>

AUG 13 2010

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PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

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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)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Linda Dell</i>	DATE 8/10/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 8/19/10

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
144c-2 The location of a smoking room or outside smoking area shall be a safe distance from heat sources, hot water heaters, combustible or flammable materials and away from common walkways and exits.	The designated staff smoking area is located along a common walkway directly outside of the fire exit in the Concourse Wing.	07/19/2010 Ongoing	<p>Immediate Correction: On 7/19/10 the smoking area was relocated for residents and 3rd shift staff use. It is now located at the far end of the courtyard away from common walkway and exit. All other staff must use the staff smoking area in the Main Courtyard. New signs were posted and staff and residents were educated. See Attachment B.</p> <p>Long Term Compliance and Quality Assurance: The Director of OLAR will monitor staff smoking breaks and where they are taken to assure that it does not occur near common areas.</p>	<p>Steps have been taken to correct violation; full compliance is not yet achieved.</p> <p><i>[Signature]</i> Date: 8/19/10 Initials: (DPW)</p>