



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

ADULT RESIDENTIAL LICENSING

SEP 13 2010

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

Mr. Robert R. Packer, CEO
Home Nursing Agency Community Services
201 Chestnut Avenue, P.O. Box 352
Altoona, Pennsylvania 16601

RE: Dorothy M. Tartaglio Home
1911 Twelfth Avenue
Altoona, Pennsylvania 16601

Dear Mr. Packer:

As a result of the Department of Public Welfare's licensing inspection on August 3, 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.

As a result of your personal care home's recent adjustment of the use of physical space, we are revising your licensed capacity.

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".

Kevin T. Casey
Deputy Secretary

Enclosures
License
Violation Report

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


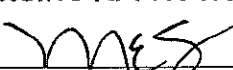
NAME AND ADDRESS OF PERSONAL CARE HOME Dorothy M. Tartaglio Home 1911 Twelfth Avenue, Altoona, PA 16601		CURRENT LICENSE NUMBER 360310	
INSPECTION DATE(S) (Include all dates of the inspection) 8/3/2010		REGIONAL REPRESENTATIVE Rebecca Riel; Lori Gensil	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 8-24-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 8/26/10

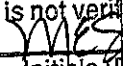
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26b The quality management plan shall address the periodic review and evaluation of the following: (3) Staff person training.	The home's quality management plan review for all of 2009 to present does not include staff person training.	8-5-10	PCH mgr, Community Service mgr, and Director of Adult Service. met to discuss quarterly Quality Management Plan. PCH mgr will keep all staff updated on required Annual training. next quality management meeting scheduled 10-26-10 to discuss staff training on a quarterly basis.	MES 8/26/10

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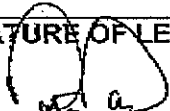
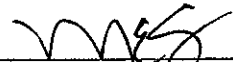
Adult Residential Licensing

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63a At least one staff person for every 50 residents who is trained in first aid and certified in obstructed airway techniques and cardiopulmonary resuscitation shall be present in the home at all times.	Staff A is not certified in First Aid and worked alone on 7/18/2010, 7am-3pm and 7/31/2010, 7am-3pm.	8-7-10	Staff was suspended until First Aide Training was received from 8-5-10 thru 8-7-10. PCH mgr will monitor on a monthly Basis that all staff are up to date and current with First Aide & CPR Training.	Steps have been taken to correct violation; full compliance is not verifiable 8/26/10  Date Initials (DPW)



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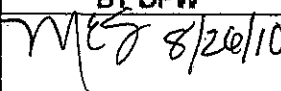
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65g Direct care staff persons, ancillary staff persons, substitute personnel and regularly-scheduled volunteers shall be trained annually in the following areas: (3) Resident rights (under these regulations). (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101—10225.5102).	Staff A with date of hire of 5/24/2008 did not complete annual training on resident rights or The Older Adult Protective Services Act in the 2009 training year.	8-9-10 8/30/10	On 8-6-10 PCH staff was trained by local ombudsmen on Resident Rights + older Adult Protective Services Act. and will provide Annual training as well in the future. Staff A was trained on 8-9-10 by PCH Mgr due to being on suspension during scheduled training. The administrator will monitor the staff training plan to ensure each staff receives the required training.	MES 8/26/10


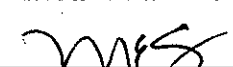
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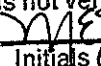
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85d Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.	The trash can in the kitchen did not have a lid that fully covered lid the can and had an approximate 3 inch gap opening.	8-3-10	A new trash can was purchased, that completely covers/closes on top of the trash can and will remain in the kitchen at all times	 8/26/10

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190a A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.	-Direct Care Staff A administers medications to residents. Staff A's last observed medication pass occurred on 12/25/2008. -Direct Care Staff B administers medications to residents and had the last medication pass observation in 3/2009. It has been more than one year since each staff received medication observations.	8-11-10	All staff were observed during a medication pass. By  a train the trainer. PCH mgr will be attending the train the trainer Medication Training on 10-12 & 10-13-10 to keep all staff updated with medication observations and training as required.	Steps have been taken to correct violation; full compliance is not verified 8/26/10  Date Initials (DPW)

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226a The resident shall be assessed for mobility needs as part of the resident's assessment.	The medical evaluation dated 4/26/2010 for Resident 1 states that the resident is unable to move from one location to another without physical assistance from others. The assessment dated 4/29/2010 states that resident is independently mobile.	8-4-10	Medical Evaluation was faxed to PCP & changed to Resident Being able to exit the facility Independently. PCH mgr will monitor Medical Evals when admitted & annually to make sure Resident mobility needs are accurate and updated as needed	Steps have been taken to correct violation; full compliance is not verified 8/26/10 Date Initials (DPW)

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