



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
HARRISBURG, PENNSYLVANIA 17102-1810

ADULT RESIDENTIAL LICENSING
Central Region Field Office
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Harrisburg, Pennsylvania 17102-1810

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CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: February 7, 2011

Ms. Nancy A. Caffrey-Shafer, President
Zerbe Sisters Nursing Center, Inc.
Zerbe Sisters Nursing Center
2499 Zerbe Road
Narvon, Pennsylvania 17555

Dear Ms. Caffrey-Shafer:

As a result of the Department of Public Welfare's licensing inspection on August 25, 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.

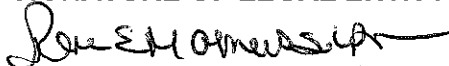
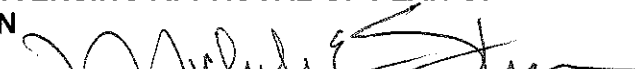
Sincerely,

A handwritten signature in black ink, appearing to read 'M Strauser'.

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 Zerbe Sisters Nursing Center, 2499 Zerbe Road, Narvon, Pennsylvania 17555		CURRENT LICENSE NUMBER 322370	
INSPECTION DATE(S) (Include all dates of the inspection) August 25, 2010		REGIONAL REPRESENTATIVE Debora McConnell, Steve Snyder	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) RENE E. MATHEWS, LPN, ADMINISTRATOR			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 10/21/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 2/2/11

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
81b Wheelchairs, walkers, prosthetic devices and other apparatus used by residents shall be clean, in good repair and free of hazards.	The bed of resident #1 was equipped with enabler handles on both sides of the bed which were not securely attached to the bed. In addition, the enabler handles exceeded 18" in length and had openings that could allow for possible entrapment of a person's head or limb.	8/25/10 Corrected	The enabler bars were removed while inspectors were still on campus. * A new bar was secured on the bed on 8/25. This meets regulations (by maintenance Dept) In the future, any resident needing the assist of an enabler bar will use one provided by the facility. * A single bar	MFO 2/2/11