

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to MORAVIAN HALL SQUARE OF NAZARETH, PA, INC.

To operate MORAVIAN HALL SQUARE PERSONAL CARE RESIDENCES

Located at 175 WEST NORTH STREET, NAZARETH, PA 18064

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

To provide Personal Care Homes

The total number of persons which may be cared for at one time may not exceed 104
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 25

This certificate is granted in accordance with the Public Welfare Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes

and shall remain in effect from March 21, 2011 until March 21, 2012,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 226280

Robert E. Robinson

ISSUING OFFICER

R. C. King

DIRECTOR

NOTE: This certificate is issued for the above site(s) only and is not transferable
and should be posted in a conspicuous place in the facility.

PW 628 - 01/11



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

ADULT RESIDENTIAL LICENSING

MAR 21 2011

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

Ms. Susan C. Drabic, President
Moravian Hall Square of Nazareth, PA, Inc.
Moravian Hall Square Personal Care Residences
175 West North Street
Nazareth, Pennsylvania 18064

Dear Ms. Drabic:

As a result of the Department of Public Welfare's licensing inspection on January 31, 2011 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, appearing to read 'R Melusky'.

Ronald Melusky
Acting Director

Enclosures
License
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME MORAVIAN HALL SQUARE ASSISTED LIVING RESIDENCES, 175 WEST NORTH STREET NAZARETH, PA 18064		CURRENT LICENSE NUMBER 226280	
INSPECTION DATES (Include all dates of the inspection) 01/31/2011		REGIONAL REPRESENTATIVE Mariann O'Malley, Jason Harvey	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Patricia Chukalovcak, RN, BSN, Director of Personal Care Services</i>			
SIGNATURE OF LEGAL ENTITY <i>Patricia Chukalovcak</i>	DATE <i>2/11/11</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Dune C. Valence</i>	DATE <i>2-22-11</i>

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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)	DATE COMPLIANCE VERIFIED BY
131f Fire extinguishers shall be inspected and approved annually by a fire safety expert. The date of the inspection shall be on the extinguisher.	The fire extinguisher located in the second floor boiler/maintenance room has not been inspected by a fire safety expert since 12/09.	<i>1/31/11 Completed</i>	<p>Corrected at time of inspection.</p> <ol style="list-style-type: none"> 1. Dir. of Maintenance placed the fire extinguishers on the monthly preventive maintenance check list. 2. Dir. of Maintenance to review log monthly for compliance. 3. Maintenance staff to replace expired extinguishers immediately and report replacement to Dir. of maintenance. 4. Scheduled annual extinguisher inspections by A plus Fire Protection Co. to continue. Fire extinguisher List to be provided to A Plus by Dir. of Maintenance to prevent oversight of in-house extinguishers due for inspection. 	<i>DCU 2-22-11</i>

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FEB 11 2011

SCRANTON FIELD OFFICE
Adult Residential Licensing

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

NAME AND ADDRESS OF PERSONAL CARE HOME MORAVIAN HALL SQUARE ASSISTED LIVING RESIDENCES, 175 WEST NORTH STREET NAZARETH, PA 18064		CURRENT LICENSE NUMBER 22628D	
INSPECTION DATES (Include all dates of the inspection) 01/31/2011		REGIONAL REPRESENTATIVE Mariann O'Malley, Jason Harvey	
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 <i>Patricia Chuchalovick</i>	DATE 2/11/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Diane C. Valence</i>	DATE 2-22-11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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)	DATE COMPLIANCE VERIFIED BY																
132g 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.	A review of the home's fire drill log from 1/31/10 to 1/31/11 indicates that the non-waking hour drills are being routinely conducted at approximately the same times. Non-waking hour drills were recorded as follows: <table border="1"> <thead> <tr> <th>Date</th> <th>Time</th> </tr> </thead> <tbody> <tr><td>1/31/10</td><td>5:41am</td></tr> <tr><td>3/31/10</td><td>5:34am</td></tr> <tr><td>5/27/10</td><td>5:18 am</td></tr> <tr><td>7/8/10</td><td>5:15 am</td></tr> <tr><td>8/20/10</td><td>5:42 am</td></tr> <tr><td>9/30/10</td><td>5:46 am</td></tr> <tr><td>12/20/10</td><td>5:24 am</td></tr> </tbody> </table>	Date	Time	1/31/10	5:41am	3/31/10	5:34am	5/27/10	5:18 am	7/8/10	5:15 am	8/20/10	5:42 am	9/30/10	5:46 am	12/20/10	5:24 am	3/01/11	1. Dir. of Personal Care and Dir. of Maintenance (Miss Fire Safety Expert) to conduct non-waking hour fire drills between 12 MN and 5:00 AM. 2. Dir. of Personal Care to review Fire Drill Log quarterly to ensure fire drills are conducted at varying times and on different days of the week. Future monthly drills will be scheduled accordingly. 3. A non-waking hour fire drill will be conducted between the hours of 12 MN and 3:00 AM in the month of February 2011.	Steps have been taken to correct violation; full compliance is not verifiable Date: _____ Initials (DPW): _____
Date	Time																			
1/31/10	5:41am																			
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VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME MORAVIAN HALL SQUARE ASSISTED LIVING RESIDENCES, 175 WEST NORTH STREET NAZARETH, PA 18064		CURRENT LICENSE NUMBER 226280	
INSPECTION DATES (include all dates of the inspection) 01/31/2011		REGIONAL REPRESENTATIVE Mariann O'Malley, Jason Harvey	
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 <i>Patricia Chuchalovich</i>	DATE 2/11/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Doreen C. Valence</i>	DATE 2-22-11

REGULATION 55 Pa.Code §2600	VIOLATION					DATE COMPLIANCE VERIFIED BY	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)	DATE COMPLIANCE VERIFIED BY
	Mont	Date	Time	Evac. Time	FSE			
	Jan				No			See previous page 2 of 3
	Feb				No			
	Mar				No			
	Apr				No			
	May				No			
	Jun				No			
	Jul				No			
	Aug				No			
	Sep				No			
	Oct				No			
	Nov				No			
	Dec				No			

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