

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to THE VILLAGE OF NANTY GLO P.C.H., INC.

To operate THE VILLAGE OF NANTY GLO P.C.H.

Located at 628 PIKE ROAD, JOHNSTOWN, PA 15909

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

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 48
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: _____

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 October 16, 2011 until October 16, 2012,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 325690

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

OCT 07 2011

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

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

Dear Mr. Croce:

As a result of the Department of Public Welfare's licensing inspection on August 18, 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", with a long horizontal stroke extending to the right.

Ronald Melusky
Director

Enclosures
License
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME THE VILLAGE OF NANTY GLO P C H, 628 PIKE ROAD JOHNSTOWN, PA 15909		CURRENT LICENSE NUMBER 325690	
INSPECTION DATES (Include all dates of the inspection) 08/18/2011		REGIONAL REPRESENTATIVE Doug Hoover, 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) Janet L. Haber Korn RD PCHA			
SIGNATURE OF LEGAL ENTITY <i>Janet L. Haber Korn</i>	DATE 08/25/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Gloria Emick</i>	DATE 9-27-11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE BY WHICH CORRECTION WILL BE COMPLETED	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
3c The personal care home shall post the current license, a copy of the current Violation Report (VR) issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.	A copy of 55 Pa.Code Chapter 2600 was not posted in the home. PCH Division Central Region Field Office SEP 6 2011 RECEIVED	8-25-11	A copy of 55 PA Code Chapter 2600 was placed at the front desk immediately. It is attached to the entrance ^{exit} wall and there is a reminder that in the event it is removed it shall be returned to the front desk. Placement will be checked daily using a monitoring form. See form.	9-27-11 BE

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SIGNATURE OF LEGAL ENTITY <i>[Signature]</i>	DATE <i>08/25/11</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE <i>9-27-11</i>
SIGNATURE OF LEGAL ENTITY <i>Janet L. Heberkorn RD PCHA</i>	DATE <i>08/25/11</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE <i>9-27-11</i>

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25b 25b - The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.	<ul style="list-style-type: none"> Resident #1's contract, dated 7/1/11, was not signed by the home. Resident #4's contract, dated 5/14/10, was not signed by the resident. 	<p><i>08/25/11</i></p> <p><i>Ongoing</i></p>	<p><i>Contract Resident # 1 was signed by home on 08/25/11</i></p> <p><i>Resident #2 contract was signed by resident on 08/25/11</i></p> <p><i>Contracts will be signed and all contracts will be reviewed by both the home designee and the administrator before filing contract into resident's chart.</i></p>	<p><i>Steps have been taken to correct violation; full compliance is not verifiable</i></p> <p><i>9-27-11 BE</i></p> <p>Date <i>9-27-11</i> Initials <i>(DPW)</i></p>

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SIGNATURE OF LEGAL ENTITY <i>Janet L. Haber Korn RD/PCA</i>	DATE 08/25/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Gloria Smith</i>	DATE 9-27-11

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44g The telephone number of the Department's personal care home regional office, the local ombudsman or protective services unit in the area agency on aging, Pennsylvania Protection & Advocacy, Inc., the local law enforcement agency, the Commonwealth Information Center and the personal care home complaint hotline shall be posted in large print in a conspicuous and public place in the	The home had the incorrect telephone number for the personal care home complaint hotline.	8-25-11	The correct personal care home complaint hot line was posted in all conspicuous public places in place of the former number. Internet access will be updated to enable facility to keep abreast of changes.	9-27-11 <i>SE</i>

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SIGNATURE OF LEGAL ENTITY <i>Janet L Haberkm</i>	DATE <i>08/25/11</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>GE</i>	DATE <i>9-27-11</i>
<i>Janet L Haberkm RD PCHA</i>	<i>08/25/11</i>		

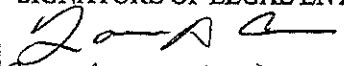
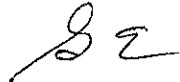
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SIGNATURE OF LEGAL ENTITY <i>Janet K. Haberkorn</i>	DATE 08/25/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Gloria Emick</i>	DATE 9-27-11

REGULATION 55 Pa. Code §2600	VIOLATION	DATE BY WHICH CORRECTION WILL BE COMPLETED	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
54a Direct care staff persons shall have the following qualifications: (1) Be 18 years of age or older, except as permitted in subsection (b). (2) Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry. (3) Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care	Staff A, hired 6/10/11, does not have a high school diploma, GED diploma, or active registration status on the Pennsylvania nurse aide registry.	8-18-11 Ongoing	When staff member was hired she was scheduled to take math portion of GED 8-3-11 - She had worked for 10 years as a personal care aide. On 8-18-11 I called the GED test center and was informed she failed the test. She was dismissed. There will be no new hires without GED or diploma. Re-education on Regulations that individual working on GED no longer can be hired was given at time of survey.	9-27-11 SE

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<i>Janet L. Haberkorn RDPCHA</i>	<i>08/25/11</i>		

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services with reasonable skill and safety.			<i>Contd.</i>	

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SIGNATURE OF LEGAL ENTITY <i>Janet L. Haberkorn</i>	DATE 08/25/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Glenn Smith</i>	DATE 9-27-11



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88a Floors, walls, ceilings, windows, doors and other surfaces shall be clean, in good repair and free of hazards.	Room 124 does not have a door knob on the outside of the door.	08/18/11	Room 124: Door knob was replaced on 08/18/11. Staff will be instructed to look for any and all potential hazards with floor, ceiling, window doors and report all problems to Administration. All reports shall be made in writing to assure the right parties are notified.	9-27-11 SE

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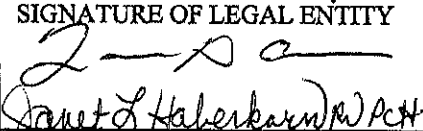
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98c The home shall have a working television and radio available to residents in a living room or lounge area.	The home does not have a radio in the lounge area.	<i>08/25/11</i>	<i>Radio will be mounted in the lounge to ensure residents do not remove. Staff will be notified and briefed that radio is to stay in lounge area at all times.</i>	<i>9-27-11 GE</i>

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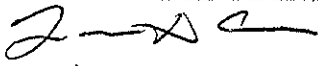

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101j7 Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on/off at bedside.	The bedside lamp in room 116 did not have a light bulb.	<i>08/18/11</i>	<i>Lamp was repaired by replacing light bulb. Staff will be directed to check each and every lamp daily before bedtime.</i>	<i>9-27-11 BE</i>

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132b A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.	The home did not have a fire safety inspection or supervised fire drill within the past 12 months.	<i>08/25/11</i> <i>ongoing</i>	<i>A fire safety inspection and fire drill is conducted annually. Documentation of these fire drills and fire inspection will be kept on file. Administration shall keep two copies of their report on file in two different locations also verifying they are done on an annual basis.</i>	<div style="text-align: right;"> <p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p><i>9-28-11</i> <i>EE</i></p> <p>Date Initials (DPW)</p> </div>

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144c1 If smoking is permitted, the designated smoking room or area outside the home shall have fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the home, fire resistant furniture and fire extinguishers.	There were 2 green vinyl chairs in the smoking area behind the home that are not fire retardant. Each of these chairs had 3 to 4 burn holes in the vinyl with melted edges.	08/20/11	The two green vinyl chairs were removed from the smoking area. Only five resistant chairs will be allowed in smoking area. Staff will check daily to ensure only five resistant chairs are used in smoking area.	9-27-11 SE

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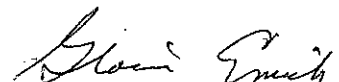
REGULATION 55 Pa.Code §2600	VIOLATION	DATE BY WHICH CORRECTION WILL BE COMPLETED	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
183e Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.	There was 1 loose, white oval <i>Namenda</i> pill that was sitting at the bottom of the 1st drawer of the medication cart.	8-22-11	The namenda pill was discarded. The medicine cart will be cleaned weekly and signed by staff doing the cleaning on Monday mornings.	9-27-11 <i>[Signature]</i>

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

NAME AND ADDRESS OF PERSONAL CARE HOME THE VILLAGE OF NANTY GLO P C H, 628 PIKE ROAD JOHNSTOWN, PA 15909		CURRENT LICENSE NUMBER 325690	
INSPECTION DATES (Include all dates of the inspection) 08/18/2011		REGIONAL REPRESENTATIVE Doug Hoover, 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) <i>Janet L. Haberborn R/PENA</i>			
SIGNATURE OF LEGAL ENTITY <i>[Signature]</i>	DATE <i>08/25/11</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE <i>9-27-11</i>
<i>[Signature]</i>	<i>08/25/11</i>	<i>[Signature]</i>	<i>9-27-11</i>

REGULATION 55 Pa.Code §2600	VIOLATION	DATE BY WHICH CORRECTION WILL BE COMPLETED	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
187d The home shall follow the directions of the prescriber.	Resident #2 has a prescription order for <i>Senna</i> tablets to be taken once daily, however, the home was administering the tablets three times daily.	<i>08/18/11</i>	<p>The order was immediately corrected. A staff meeting will be held at 2pm to re-educate staff on proper procedure in entering medication a how to change MAR to reflect dose changes.</p> <p>An Audit of medications and medication Administration Records will be completed by the Administrator on a monthly basis -- SE</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p><i>9-27-11</i> <i>SE</i></p> <p>Date Initials (DPW)</p>

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

NAME AND ADDRESS OF PERSONAL CARE HOME THE VILLAGE OF NANTY GLO P C H, 628 PIKE ROAD JOHNSTOWN, PA 15909		CURRENT LICENSE NUMBER 325690	
INSPECTION DATES (Include all dates of the inspection) 08/18/2011		REGIONAL REPRESENTATIVE Doug Hoover, 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) <i>Just L. Haberkorn RD PCHA</i>			
SIGNATURE OF LEGAL ENTITY 	DATE 08/25/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 9-27-11
<i>Just L. Haberkorn RD PCHA</i>	08/25/11		

REGULATION 55 Pa. Code §2600	VIOLATION	DATE BY WHICH CORRECTION WILL BE COMPLETED	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
224a A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.	The preadmission screening form for resident #2, dated 6/10/11, does not indicate whether the needs of the resident can be met by the home.	8/19/11	The preadmission screening Form was completed. The screener has educated herself on use of the new form and will recheck each form for completion when done.	9-27-11 <i>GG</i>