

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to HOLLIDAYSBURG VETERANS HOME  
LEGAL ENTITY

To operate HOLLIDAYSBURG VETERANS' HOME  
NAME OF FACILITY OR AGENCY

Located at P.O.BOX 319, HOLLIDAYSBURG, PA 16648  
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

To provide Personal Care Homes  
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 167  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller. (MAXIMUM CAPACITY)

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  
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from January 11, 2012 until January 11, 2013,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 343600

*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

JAN 26 2012

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

Mr. Martin C. Kupchella, Administrative Officer II  
Hollidaysburg Veterans Home  
Hollidaysburg Veterans' Home  
P.O. Box 319  
Hollidaysburg, Pennsylvania 16648

Dear Mr. Kupchella:

As a result of the Department of Public Welfare's licensing inspection on November 9, 2011 and November 30, 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.

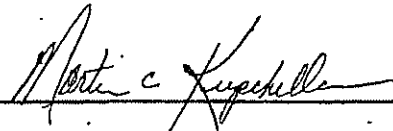

Sincerely,


A handwritten signature in black ink, appearing to be 'R. Melusky', with a long horizontal line 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 HOLLIDAYSBURG VETERANS HOME, P O BOX 319 HOLLIDAYSBURG, PA 16648		CURRENT LICENSE NUMBER 343600	
INSPECTION DATES (include all dates of the inspection) 11/09/2011		REGIONAL REPRESENTATIVE Serena Chou, 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 	DATE 12/27/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 1-4-12

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
65e Direct care staff persons shall have at least 12 hours of annual training relating to their job duties.	<ul style="list-style-type: none"> <li>Direct care staff person A received only 7.75 hours of annual training in training year 2010.</li> <li>Direct care staff persons B and C each received only 8.75 hours of annual training in training year 2010.</li> </ul>	<u>1/12/2011 and on-going</u>	<p>For the identified training deficiency: A compulsory training program will be developed for direct care staff. The corrective plan addresses the upcoming 2012 year.</p> <p>The corrective measure will address all staff persons in the personal care unit to ensure the appropriate number of training hours.</p> <p>Adherence to the training program will be monitored by the Administrator and reported during quarterly QA meetings.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>1-4-12 </p> <p>Date Initials (DPW)</p>

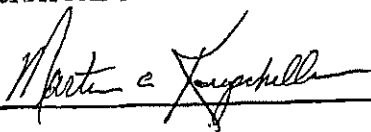

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HIBG. VET'S HOME

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P. 200 RECEIVED TIME DEC. 27. 2:14PM SDCORER TWCIDEM HAH 95:56 DEC-27-2011

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

NAME AND ADDRESS OF PERSONAL CARE HOME HOLLIDAYSBURG VETERANS HOME, P O BOX 319 HOLLIDAYSBURG, PA 16648		CURRENT LICENSE NUMBER 343600	
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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: (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert. (2) Emergency preparedness procedures and recognition and response to crises and emergency situations. (3) Resident rights (under these	<ul style="list-style-type: none"> <li>Direct care staff persons A and B did not receive training in OAPSA during training year 2010.</li> <li>Direct care staff person G did not receive training in OAPSA and falls and accident prevention during training year 2010.</li> </ul>	<u>1/12/2011 and on-going</u>	<p>For the identified training deficiency: A compulsory training program will be developed for direct care staff. The program will include all required training outlined in 65G</p> <p>A compulsory compliance aspect has been added to the training program. Adherence to the schedule will be monitored. Enforcement via the facilities progressive disciplinary procedures will be utilized. The training program will be monitored by the administrator will monitor for compliance. The results of the monitoring will be reported at the quarterly QA meetings.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>1-4-12-RE Date Initials (DPW)</p>

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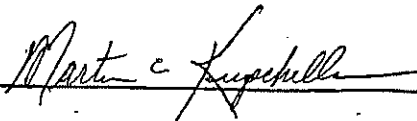

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12/27/2011 14:31 FAX 8146965260

HIBG. VET'S HOME

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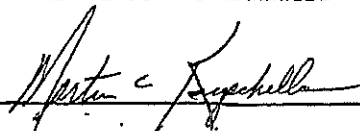

**VIOLATION REPORT**  
**PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

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regulations). (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101—10225.5102). (5) Falls and accident prevention. (6) New population groups that are being served at the home that were not previously served, if applicable.			<i>Contd.</i>	

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

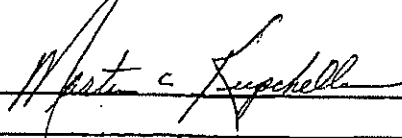
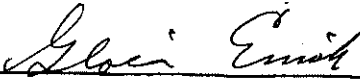
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181c A resident who desires to self-administer his medications shall be assessed by a physician, physician's assistant or certified registered nurse practitioner regarding the ability to self-administer and the need for medication reminders.	Resident # 2 self-administers medications but has not been assessed by a physician, physician's assistant or certified, registered nurse practitioner regarding ability to self-administer and the need for reminders to take medications.	<u>1/12/2011 and on-going</u>	For resident #2: The resident no longer has the inhaler. The resident was assessed by the unit RN. The assessment does not support self-administration for this resident.  For other residents: An in-service will be conducted with direct care staff on the requirements for self administration of medications. Compliance will be monitored by monthly audits. The results of the audits will be reviewed with the administrator and reported during quarterly QA meetings.	1-4-12 <i>SE</i>

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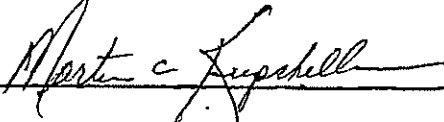
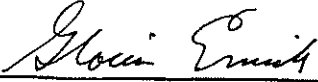
12/27/2011 14:32 FAX 8146965260 HIBG. VET'S HOME 005

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

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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.	On 11/30/2011, one loose red, oblong pill, one pink round pill, one white pill, and one pink, oblong pill were found in the top drawer of the medication cart.	<u>1/12/2011 and on-going</u>	All loose medications were discarded per facility protocol. Medication rooms, Carts and refrigerators will be inspected weekly for 3 months. The inspection will look at proper storage, disposal and administration of prescribed medications.  The results of the audit will be provided to the administrator for any corrective action(s). The findings will be reported during the quarterly QA meetings.	Steps have been taken to correct violation; full compliance is not verifiable 1-4-12 Date Initials (DPW)

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

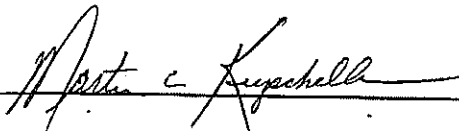

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187a A medication record shall be kept to include the following for each resident for whom medications are administered: (1) Resident's name. (2) Drug allergies. (3) Name of medication. (4) Strength. (5) Dosage form. (6) Dose. (7) Route of administration. (8) Frequency of administration. (9) Administration times. (10) Duration of therapy, if applicable. (11) Special	<ul style="list-style-type: none"> <li>The medication administration record for resident # 1 does not include staff initials for Acetaminophen with Codeine on 10/13/2011.</li> <li>The medication administration record for resident # 2 does not include staff initials for Donepezil, Paroxetine, Trazodone, and Docusate on 10/9/2011, and Dicyclomine on 10/31/2011.</li> <li>The medication administration record for resident # 3 does not include diagnoses for all medication administered in October, 2011.</li> <li>The medication administration record for resident # 4 does not include staff initials for Amifiza and Metamucil powder on 11/25/2011.</li> </ul>	<u>1/12/2011 and on-going</u>	<p>The medication administration record (MAR) will be inspected weekly by the unit supervisor for months. The findings will be forwarded to the administrator. Coorrective action(s) will be enforced through the facilities internal disciplinary procedures</p> <p>The results of the monitoring will be reported and reviewed during the quarterly QA meetings.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>1-4-12 Date Initials (DPW)</p>
			The home will amend residents' MARs to ensure that all of the required information is captured. -SE	

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

NAME AND ADDRESS OF PERSONAL CARE HOME HOLLIDAYSBURG VETERANS HOME, P O BOX 319 HOLLIDAYSBURG, PA 16648		CURRENT LICENSE NUMBER 343600	
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precautions, if applicable. (12) Diagnosis or purpose for the medication, including pro re nata (PRN). (13) Date and time of medication administration. (14) Name and initials of the staff person administering the medication.			<i>Cont'd.</i>	

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

12/27/2011 14:33 FAX 8146965260  
 600 P TATOL

HLBG. VET'S HOME

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NAME AND ADDRESS OF PERSONAL CARE HOME HOLLIDAYSBURG VETERANS HOME, P O BOX 319 HOLLIDAYSBURG, PA 16648		CURRENT LICENSE NUMBER 343600	
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SIGNATURE OF LEGAL ENTITY <i>Martin C. Ruppchell</i>	DATE 12/27/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Glenn E. Smith</i>	DATE 1-4-12

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 # 3's Bacitracin, included a physician order for five days for abrasions, but the medication administration record indicated only four days were given.	1/12/2011 and on-going	The abrasion for resident #3 is healed. Treatment administration recorded will be monitored against physician orders. 5 records will be audited weekly for 3 months (total of 30 records)  The results of the monitoring and any corrective action(s) will be reported during the quarterly QA meetings.	Steps have been taken to correct violation; full compliance is not verifiable 1-4-12 Date Initials (DPW)

600 P RECEIVED TIME DEC. 27. 2:14PM  
 69:59 1102-27-DEC-27