

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to JEAN MCVEY

To operate MCVEY PERSONAL CARE HOME

Located at 235 NORTH GALLATIN AVENUE, UNIONTOWN, PA 15401

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

TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 8  
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 April 16, 2012 until April 16, 2013,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 460240

*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

PHONE: (717) 783-3670

FAX: (717) 783-5662

APR 20 2012

Ms. Jean McVey, Administrator  
McVey Personal Care Home  
235 North Gallatin Avenue  
Uniontown, Pennsylvania 15401

Dear Ms. McVey:

As a result of the Department of Public Welfare's licensing inspection on March 28, 2012 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.

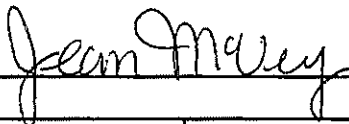
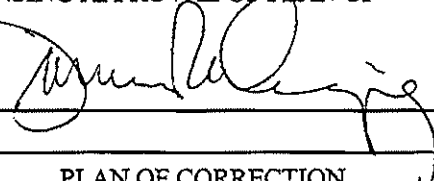
Sincerely,

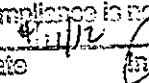
A handwritten signature in black ink, appearing to read "R. Melusky".

Ronald Melusky  
Director

Enclosures  
License  
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME MCVEY PERSONAL CARE HOME, 235 NORTH GALLATIN AVENUE UNIONTOWN, PA 15401		CURRENT LICENSE NUMBER 460240	
INSPECTION DATES (Include all dates of the inspection) 03/28/2012		REGIONAL REPRESENTATIVE D. McConnell	
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 4/9/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 4/11/12

REGULATION 55 Pa.Code §2600	VIOLATION	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
13b The maximum capacity specified on the Certificate of Compliance (License) may not be exceeded.	On 3/28/12, there were 9 residents living in the home. The home's licensed capacity is 8.	5/1/12 Gave A 30 day notice to A resident on 4/1/12 and will assist them in finding A new residence by 5/1/12. And in the future I will MAKE SURE WE dont GO OVER OUR license capacity	Steps have been taken to correct violation; full compliance is not verifiable Date <u>5/1/12</u>  (DPW)

RECEIVED

Western Field Office  
Adult Residential Licensing

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

NAME AND ADDRESS OF PERSONAL CARE HOME MCVEY PERSONAL CARE HOME, 235 NORTH GALLATIN AVENUE UNIONTOWN, PA 15401		CURRENT LICENSE NUMBER 460240	
INSPECTION DATES (Include all dates of the inspection) 03/28/2012		REGIONAL REPRESENTATIVE D. McConnell	
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>Jean Milley</i>	DATE 4/9/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>JM</i>	DATE 4/11/12

REGULATION 55 Pa.Code §2600	VIOLATION	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
14a Prior to issuance of a license, a written fire safety approval from the Department of Labor and Industry, the Department of Health or the appropriate local building authority under the Pennsylvania Uniform Construction Code Act (35 P.S. §§ 7210.101 - 7210.1103) is required.	The home's current Certificate of Occupancy issued by the Pennsylvania Department of Labor and Industry on 3/24/92 designates "C3 GROUP HABITATION (4 THRU 8 RESIDENTS) SP SMALL PERSONAL CARE HOME (4 THRU 8 RESIDENTS) with a maximum occupancy of 8. The home currently has 9 residents who need and receive personal care services.  <b>RECEIVED</b>  APR 11 2012  Western Field Office Adult Residential Licensing	5/1/12 GAVE A 30 day notice to A resident on 4/1/12 and will assist them in finding a new residence by 5/1/12. And in the future I will MAKE SURE we don't GO OVER our license capacity	Steps have been taken to correct violation; full compliance is not verifiable Date <u>4/11/12</u> <i>JM</i> Lizsis (DPW)