



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

SEP 27 2017

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

RE: The Village of Nanty Glo PCH  
License #: 325690

Dear Mr. Croce:

As a result of the Department of Human Services' annual licensing inspections on July 12, 2017 and July 13, 2017 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Inspection](https://www.surveymonkey.com/r/BHSL_Inspection).

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink that reads "J. Rowe".

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary



Violation Report: 32569 - 07/12/2017 - Showers, Michael  
 PCH Name: THE VILLAGE OF NANTY GLO P C H

**1. REGULATION 55 Pa.Code §2600**

2600.18 - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

**2a. DESCRIPTION OF VIOLATION**

The home has no carbon monoxide detectors as required by the Care Facility Carbon Monoxide Alarms Standards Act of September 23, 2016. The home has a propane gas furnace in the back hallway and front hallway, as well as a propane dryer and propane stove in the kitchen.

**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)**

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

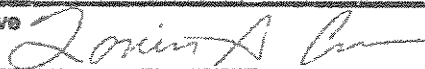
Administration will purchase and install all Carbon Monoxide alarms needed to meet the Carbon Monoxide Alarm Standards Act of September 23, 2016. The batteries will be dated and checked by staff every six months during daylight savings time. Staff will be trained on how to test alarms monthly, along with the smoke alarms. Staff will be trained on what to do if a Carbon Monoxide alarm were to sound the Alarm.

Alarms have been installed within fifteen feet of all units that may cause Carbon monoxide. Pictures have been included with correction plan.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)



Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page)

Lorin Cozza Administration

Date 07/23/17

**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of

8/8/17  
 (Date)

Plan of correction implementation status as of

8/8/17  
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by

BCS  
 (Initials)

Violation Report: 32569 - 07/12/2017 - Showers, Michael  
 PCH Name: THE VILLAGE OF NANTY GLO P C H

1. REGULATION 55 Pa.Code §2800  
 2600.64(c) - An administrator shall have at least 24 hours of annual training relating to the job duties.

2a. DESCRIPTION OF VIOLATION

Staff Member A, the home's administrator, completed a total of 24 hours of online training and 5 hours of in-person training during calendar year 2016. However, only 12 hours of annual training is permitted to be conducted online. Therefore, Staff Member A completed only 17 hours of the 24 hours required.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Home Administrator will complete all training that was missed in 2016. Administration will check all training hours for all employee's during their monthly training classes including the Administrator. Administration will then take appropriate actions to see that all employee's are up to date and on schedule to meet training requirements for the year.

\* The administrator shall complete 31 hours of training during training year 2017. *BAS* 8/8/17

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Lorin A. Croce*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Lorin A. Croce Administrator</i>	Date <i>07/23/17</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>8/8/17</u> (Date)	Plan of correction implementation status as of <u>8/8/17</u> (Date)
The above plan of correction was approved by <u><i>BAS</i></u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 32569 - 07/12/2017 - Showers, Michael  
PCH Name: THE VILLAGE OF NANTY GLO P C H

1. REGULATION 55 Pa.Code §2600

2600.88(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

The stainless steel threshold plate leading from the rear of the home to the smoking area is not securely attached to the floor and moves up and down a half inch when walking or placing weight on it. The flexing and unsteady threshold poses a tripping hazard to anyone exiting or entering the building.

The kitchen has three ceiling tiles at rear of kitchen that are heavily bowed and stained from water damage. There are also three ceiling tiles in the main large lounge area and two ceiling tiles in the smaller front lounge area that have water stains and bowing.

A section of baseboard measuring approximately 4 inches by 24 inches that runs along the floor behind the toilet, located in the back hallway bathroom, is not attached to the wall and is lying on the floor.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The stainless steel threshold plate will be put into place by an additional three screws also a board will be placed under the plate and secured appropriately so the plate can not move out of place. Staff will check the plate daily for movement. All damaged ceiling towels were replaced in the kitchen, and both livingrooms. Staff was reminded to alert administration of any and all damaged ceiling towels when they notice them. The section of the baseboard was reattached to the wall behind the toilet in back bathroom. Staff again reminded to alert administration of any materials that are in disrepair. Pictures with plan of correction

Repeat Violation: Yes      Date(s) of Previous Violation(s): 07/19/2016

Signature of Legal Entity Representative (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Laura A. Cucco, Administrator*      Date *07/23/17*

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The above plan of correction was approved by BTAS (Initials)

Plan of correction Implementation status as of 8/8/17 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 32569 - 07/12/2017 - Showers, Michael  
 PCH Name: THE VILLAGE OF NANTY GLO P C H

1. REGULATION 55 Pa.Code §2600  
 2600.95 - Furniture and equipment must be in good repair, clean and free of hazards.

2a. DESCRIPTION OF VIOLATION

The toilet, located in the back hallway bathroom, is not tightly secured to the floor and moves when pressure is placed upon it.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The toilet in the back hallway bathroom was reattached to the floor with two new bolts. Also the toilet is now framed by wood bolted to the concrete floor. This will stop the toilet from working its way loose when residents move from wheelchairs and scooters to the toilet. Staff will check daily during cleaning to make sure toilet is stationary. Picture included with plan of correction

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Lorinda*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Lorinda A. Cross Administrator* Date *07/23/17*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 8/8/17  
 (Date)

Plan of correction implementation status as of 8/8/17  
 (Date)

- Fully Implemented
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- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by BAS  
 (Initials)

Violation Report: 32589 - 07/12/2017 - Showers, Michael  
 PCH Name: THE VILLAGE OF NANTY GLO PCH

**1. REGULATION 55 Pa.Code §2600**

2600.103(f) - Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

**2a. DESCRIPTION OF VIOLATION**

The home's large chest freezer and side by side household freezer do not contain a thermometer.

**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)**

*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

Administration will purchase and install freezer thermometers in the large chest freezer and side by side. Staff will be reminded to check of thermometers and their temperature daily.

Administration will purchase extra thermometers in case when thermometers go missing. Administration will also check for the thermometer monthly.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative (Required on EVERY Page) 

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Louis A Croce	Date 07/23/17
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Violation Report: 32569 - 07/12/2017 - Showers, Michael  
 PCH Name: THE VILLAGE OF NANTY GLO P C H

1. REGULATION 55 Pa.Code §2600  
 2600.107(c) - The home shall maintain at least a 3-day supply of nonperishable food and drinking water for residents.

2a. DESCRIPTION OF VIOLATION  
 On 7/13/17, the home had 44 residents, but only 98.5 gallons of emergency drinking water.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)  
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The home has purchased ten new water containers holding six gallons of water each. Staff will fill those containers and add to those already in place. This will bring the total capacity to 124 gallons of water in storage containers. All containers will be full or refilled by August 1, 2017. Water will then be replaced yearly. Signs will be posted on the wall to remind staff of replacement dates.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Lorin A Cooc*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Lorin A Cooc Administration* Date *07/23/17*

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 (Date)

Plan of correction implementation status as of 8/8/17  
 (Date)

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- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by LS  
 (Initials)

Violation Report: 32569 - 07/12/2017 - Showers, Michael  
 PCH Name: THE VILLAGE OF NANTY GLO P C H

**1. REGULATION 55 Pa.Code §2600**

2600.224(a) - 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.

**2a. DESCRIPTION OF VIOLATION**

No pre-admission screening form was completed for Resident 1, who was admitted [REDACTED] 2016.

**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)**

*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

A preadmission screening was done on Resident 1 just to have one on file for [REDACTED]. Preadmission screening are to be done on all new prospective residents. Administrator and Assistant Administrator will do a check and balance of each other to ensure that the preadmission screening is done and done correctly.  
 Administration will check monthly all charts to ensure all required documents are enclosed

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative (Required on EVERY Page) *Laura*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Laura A Cross Administrator</i>	Date <i>07/23/17</i>
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 (Date)

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 (Initials)

Plan of correction implementation status as of 8/8/17  
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Violation Report: 32569 - 07/12/2017 - Showers, Michael  
 PCH Name: THE VILLAGE OF NANTY GLO P C H

**1. REGULATION 55 Pa.Code §2800**  
 2600.225(c) - The resident shall have additional assessments as follows:  
 (1) Annually.  
 (2) If the condition of the resident significantly changes prior to the annual assessment.  
 (3) At the request of the Department upon cause to believe that an update is required.

**2a. DESCRIPTION OF VIOLATION**  
 The most recent assessment for Resident 2 was completed on June 9, 2016.

**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)**  
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

An assessment was completed on Resident 2 on 7-14-17. Administration will check on the first day of each month for which residents that will need an annual assessment. Those needing an assessment will have the charts pulled and placed in the Assistant Administrator's office. The assessment will be completed and verified by both Administrator and Assistant Administrator

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Lo-in Case Administration</i>	Date <i>07/23/17</i>
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The above plan of correction was approved by <u>BBS</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented