



July 29, 2019

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
Certificate #: 325690

Dear Mr. Croce:

As a result of the Department's Bureau of Human Services Licensing's annual licensing inspection on July 16, 2019 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations 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.

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.

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, appearing to read "Kevin Hancock". The signature is fluid and cursive, written over a light blue horizontal line.

Kevin Hancock
Deputy Secretary
Office of Long-term Living

Enclosure
Violation Report

Violation Report

Facility Information

Name: THE VILLAGE OF NANTY GLO P C H
Address: 628 PIKE ROAD, JOHNSTOWN, PA 15909
County: CAMBRIA **Region:** CENTRAL

License Number: 32569

Administrator

Name: Lorin Croce **Phone:** 8147495100 **Email:**

Legal Entity

Name: THE VILLAGE OF NANTY GLO PCH INC
Address: 628 PIKE ROAD, JOHNSTOWN, PA, 15909

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 12/10/1998 **Issued By:** L&I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 47 **Waking Staff:** 35

Inspection

Type: Full **BHA Docket #:** **Notice:** Unannounced
Reason: Renewal

Inspection Dates and Department Representative

07/16/2019 - On-Site: Israel Springs, Kellie Cargile

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 48 **Residents Served:** 46

Secured Dementia Care Unit

In Home: No **Area:** **Capacity:** **Residents Served:**

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 46 **Are 60 Years of Age or Older:** 25
Diagnosed with Mental Illness: 46 **Diagnosed with Intellectual Disability:** 1
Have Mobility Need: 1 **Have Physical Disability:** 0

85a - Sanitary Conditions

Regulations

2600.
85.a. Sanitary conditions shall be maintained.

Description of Violation

On 7/16/19 at approximately 1:15 pm, the following items were observed in the Men's bathroom:

- The shower stall closest to the wall had an accumulation of black mold on the shower flooring and caulking on the wall.
- There was a shower mat that had mold on the bottom and around the edge on the top.
- The middle bathroom stall's toilet had dried feces on all sides of the seat.

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 accumulation of black mold on the shower floor has been removed. The shower mat has been changed to a new mat. Staff has been reminded to clean showers throughly using a new product specifically designed for mold. The bath mat must also be removed and cleaned with the same product. The bathroom toilet was cleaned and sanitized and staff was told to check bathrooms every hour or when they walk past the bathroom

*The administrator will monitor the condition of the home during the daily walk-throughs. BAS 7/29/19

Legal Entity Representative



Signature

Lorin A Croce Adm. 07/26/19

Printed Name and Title

Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 7/29/19
(Date)

Plan of correction implementation status as of 7/29/19
(Date)

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

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

88a - Surfaces

Regulations

2600.
88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

Two ceiling tiles in room 124 were observed to have large dark brown water stains. The stains were approximately 10 inches by 5 inches in size.
Two ceiling tiles in the hallway outside of room 124 were observed to have brown water stains that were approximately 4 inches by 4 inches in size.

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.)

All damaged ceiling towels have been replaced with new ceiling towels. Staff has been reminded to notify administration of any stained ceiling towels and/or anything damaged that is in need of repair. Also, THE VILLAGE will be installing a new roof within the coming year which should elevate this problem from occurring.

*The administrator will monitor the condition of the home during the daily walk-throughs. BAS 7/29/19

Legal Entity Representative

Signature

Lorin A Croce *President/Adm* 07/26/19

Printed Name and Title

Date

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The above plan of correction is approved as of	7/29/19 (Date)	Plan of correction implementation status as of	7/29/19 (Date)
The above plan of correction was approved by	BAS (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	

141a 1-10 Medical Evaluation Information

Regulations

2600.
 141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:
1. A general physical examination by a physician, physician's assistant or nurse practitioner.
 2. Medical diagnosis including physical or mental disabilities of the resident, if any.
 3. Medical information pertinent to diagnosis and treatment in case of an emergency.
 4. Special health or dietary needs of the resident.
 5. Allergies.
 6. Immunization history.
 7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
 8. Body positioning and movement stimulation for residents, if appropriate.
 9. Health status.
 10. Mobility assessment, updated annually or at the Department's request.

Description of Violation

Resident #1's Documentation of Medical Evaluation form (DME), dated 5/6/19, did not contain documentation for the resident's pulse rate.

Resident #2's DME, dated 11/6/18, did not contain documentation for the resident's pulse rate, blood pressure and temperature.

Resident #3's DME, dated 3/22/19, did not contain documentation for the resident's height, blood pressure, pulse rate, and temperature.

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.)

All DME's have been corrected to include, pulse rate, bp and temperatures. Staff has been trained to include these on both the DME's & MAS's. Administration will review all DME's upon completion and before filing them into the residents charts.

Legal Entity Representative


 Signature

Lorin Croce Adm. *07/26/19*
 Printed Name and Title Date

141a 1-10 Medical Evaluation Information *(continued)*

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