



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

# CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to **GARVEY MANOR NURSING HOME**  
LEGAL ENTITY

To operate **OUR LADY OF THE ALLEGHENIES RESIDENCE**  
NAME OF FACILITY OR AGENCY

Located at **1037 SOUTH LOGAN BOULEVARD, HOLLIDAYSBURG, PA 16648**  
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

\_\_\_\_\_  
ADDRESS OF SATELLITE SITE/SERVICE LOCATION

\_\_\_\_\_  
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\_\_\_\_\_  
ADDRESS OF SATELLITE SITE/SERVICE LOCATION

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 **54**  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller. (MAXIMUM CAPACITY)

Restrictions: \_\_\_\_\_

This certificate is granted in accordance with the Human Services 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 **August 29, 2021** until **August 29, 2022**,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **316410**

*Janette Biderup*  
ISSUING OFFICER

*Jamie J. Buchenauer*  
DEPUTY SECRETARY

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.



July 30, 2021

Sr. Joachim Anne Ferenchak  
Administrator  
Garvey Manor Nursing Home  
1037 South Logan Boulevard  
Hollidaysburg, Pennsylvania 16648

RE: Our Lady of the Alleghenies Residence  
Certificate #: 316410

Dear Sister Ferenchak:

The Department has received your May 20, 2021 renewal application to operate the above Personal Care Home pursuant to Title 55, PA Code, Chapter 2600. A regular license is being issued in response to your application. Your license is enclosed.

Please be advised that, pursuant to 55 Pa.Code § 20.31 (relating to annual inspection), the Department is required to conduct an onsite inspection of the above Personal Care Home at least once every twelve months. The Department will conduct an inspection of Our Lady of the Alleghenies Residence within the next twelve months. If evidence of noncompliance with Title 55, PA Code, Chapter 2600 is found during the inspection, the Department will take appropriate enforcement action.

If you have any questions about the Department's process, please contact the Bureau of Human Services Licensing's Provider Support Hotline at 1-866-503-3926 or by electronic mail at [ra-pwarlheadquarters@state.pa.us](mailto:ra-pwarlheadquarters@state.pa.us).

Sincerely,

A handwritten signature in black ink that reads "Jamie L. Buchenauer". The signature is written in a cursive style with a large initial "J".

Jamie L. Buchenauer  
Deputy Secretary  
Office of Long-term Living

Enclosure  
License