

Department of Human Services  
Bureau of Human Service Licensing  
LICENSING INSPECTION SUMMARY PUBLIC

May 18, 2023

[REDACTED], PRESIDENT  
HARMONY HOUSE MANOR INC  
[REDACTED]

RE: HARMONY HOUSE MANOR  
601 LAMBERD AVENUE  
JOHNSTOWN, PA, 15904  
LICENSE/COC#: 31439

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/18/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,  
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: HARMONY HOUSE MANOR License #: 31439 License Expiration: 05/09/2024  
 Address: 601 LAMBERD AVENUE, JOHNSTOWN, PA 15904  
 County: CAMBRIA Region: CENTRAL

**Administrator**

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

**Legal Entity**

Name: HARMONY HOUSE MANOR INC  
 Address: [Redacted]  
 Phone: [Redacted] Email: [Redacted]

**Certificate(s) of Occupancy**

Type: C-2 LP Date: Issued By: DL&I

**Staffing Hours**

Resident Support Staff: Total Daily Staff: 35 Waking Staff: 26

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #:  
 Reason: Complaint Exit Conference Date: 04/18/2023

**Inspection Dates and Department Representative**

04/18/2023 - On-Site: [Redacted]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 84 Residents Served: 25  
 Secured Dementia Care Unit  
 In Home: Yes Area: Touchstones Capacity: 26 Residents Served: 8  
 Hospice  
 Current Residents: 9  
 Number of Residents Who:  
 Receive Supplemental Security Income: 2 Are 60 Years of Age or Older: 25  
 Diagnosed with Mental Illness: 1 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 10 Have Physical Disability: 0

**Inspections / Reviews**

04/18/2023 Partial  
 Lead Inspector: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 05/01/2023  
 05/01/2023 - POC Submission  
 Submitted By: [Redacted] Date Submitted: 05/17/2023  
 Reviewer: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 05/08/2023

Inspections / Reviews *(continued)*

05/02/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/17/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 05/05/2023

05/18/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/17/2023

Reviewer: [REDACTED]

Follow Up Type: Not Required

54a Direct Care Staff

1. Requirements

2600.

54.a. Direct care staff persons shall have the following qualifications:

- 2. Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry.

Description of Violation

Direct Care Staff Person A, hired on [REDACTED], does not have a high school diploma, GED, or active registry status on the Pennsylvania nurse aide registry.

Plan of Correction

Accept ( [REDACTED] - 05/02/2023)

Staff person A is no longer employed by the home. Administrator will use a new employee checkoff list to ensure new staff persons have the qualifications required (see attached) to begin with new hire on 4/30/23.

Licensee's Proposed Overall Completion Date: 05/02/2023

Implemented ( [REDACTED] - 05/18/2023)

237a Activities

2. Requirements

2600.

237.a. The following types of activities shall be offered at least weekly:

- 1. Gross motor activities, such as dancing, stretching and other exercise.
- 3. Social activities, such as games, music and holiday and seasonal celebrations.

Description of Violation

On 4/18/23, the home's activity calendar indicated Horoscopes at 9:15 am, Devotionals at 9:30 am, and Hit the Bucket at 10:00 am. None of these activities were observed at the home in the secured dementia unit at these times. Staff and resident interviews revealed that these activities did not occur.

Plan of Correction

Accept ( [REDACTED] - 05/02/2023)

Administrator will use a daily checklist beginning 4/26/23 reflecting activities being completed and signed off by staff per the posted activity schedule to ensure activities are being done (see attached). Administrator will do visual audits (three times a week for a month) to verify activities are being done on time.

Licensee's Proposed Overall Completion Date: 05/02/2023

Implemented ( [REDACTED] - 05/18/2023)