



10/07/2014

Lorrie Hetager, Director  
Home Nursing Agency ADS  
118 Ebony Road  
Ebensburg, PA 15931

RE: Home Nursing Agency Adult Day Services  
License # 100070 - Regular

Dear Ms. Hetager:

As a result of the Department of Aging's Licensing Inspection on 09/05/2014, we have found the above named facility to be in compliance with applicable statutes, ordinances and regulations. Therefore, a Regular License is enclosed.

Thank you for your continued effort to provide quality older adult daily living services. If you have questions, please contact me at (717) 214-6716.

Sincerely,

A handwritten signature in black ink, appearing to read "Kevin Longenecker", written in a cursive style.

Kevin Longenecker  
Director

Enclosures

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF AGING

# LICENSE

This license is hereby granted to HOME NURSING AGENCY COMMUNITY SERVICES, INC.  
LEGAL ENTITY

To operate HOME NURSING AGENCY ADULT DAY SERVICES  
(NAME OF CENTER)

Located at 118 EBONY ROAD EBENSBURG, PA 15931  
(COMPLETE ADDRESS OF CENTER)

To provide older adult daily living services.

The total number of persons which may be served at one time may not exceed 29  
(MAXIMUM CAPACITY)

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

This license is granted in accordance with the Act of July 11, 1990 (P.L. 499, No. 118) and Regulations.

TITLE 6. PA CODE. CHAP. 11. OLDER ADULT DAILY LIVING CENTER Dated July 03, 1993  
(NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from November 01, 2014 until October 31, 2015

unless sooner revoked for non-compliance with applicable laws and regulations.

No: 100070 - Regular



ISSUING OFFICER

NOTE: This license is issued for the above address only and is not transferable. This license should be posted in a conspicuous place in the center.

Issued On: October 07, 2014

AGL01

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER LICENSE NUMBER:  <b>100070</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>09/05/2014</b>
NAME OF PROVIDER OR SUPPLIER  <b>Home Nursing Agency Adult Day Services</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>118 EBONY ROAD EBENSBURG, PA 15931</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
1 000	<p><b>Initial Comments</b></p> <p>COMPLIANCE</p> <p>A State licensure inspection was completed on September 5, 2014. It was determined that Home Nurse Agency Adult Day Services was in compliance with the requirements of 6 PA Code, Chapter 11, Older Adult Daily Living Centers Regulations.</p>	1 000		

AUTHORIZED PROVIDER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

DEPARTMENT OF AGING APPROVAL

DATE