



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
100 LACKAWANNA AVENUE
ROOM 330, SCRANTON STATE OFFICE BUILDING
SCRANTON, PENNSYLVANIA 18503-1923

ADULT RESIDENTIAL LICENSING

PHONE: (570) 963-3209
1-800-833-5095
FAX: (570) 963-3018

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: October 5, 2010

Ms. Linda Kanarr, CEO
St. Mary's Villa Nursing Home
516 St. Mary's Villa Road
Moscow, Pennsylvania 18444

RE: St. Mary's Villa Residence
One Pioneer Place
Moscow, Pennsylvania 18444

Dear Ms. Kanarr:

As a result of the Department of Public Welfare's licensing inspection on June 18, 2010 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations 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. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

Sincerely,

A handwritten signature in cursive script, appearing to read "Dawn C. Salame".

Regional Licensing Administrator

Enclosure
Violation Report

VIOLATION REPORT

PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

Annette Chickey
8/16/10

NAME AND ADDRESS OF PERSONAL CARE HOME St. Mary's Villa Residence, 1 Pioneer Place, Moscow, Pennsylvania 18444		CURRENT LICENSE NUMBER 203900	
INSPECTION DATE(S) (Include all dates of the inspection) June 18, 2010		REGIONAL REPRESENTATIVE Betty Bloch and Florence Babiarz	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Annette Chickey Administrator</i>			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Annette Chickey</i>		DATE 8/17/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Jan Harvey</i>
			DATE 9-29-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
65g Direct care staff persons, ancillary staff persons, substitute personnel and regularly-scheduled volunteers shall be trained annually in the following areas: (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert. (2) Emergency preparedness procedures and recognition and response to crises and emergency situations.	Staff person A, hired 2/11/08, did not receive the required 2009 annual training in # (1) of this regulation. Staff person B, hired 8/28/07, did not receive the required 2009 annual training in # (2) of this regulation. The training year was identified as 1/1/09 to 12/31/09 by staff person C, who was the designee in the administrator's absence.	06/30/10	Administrator scheduled an inservice on our evacuation & fire safety procedure. Staff persons A, B, C, & D were present at this training. Another Emergency Preparedness training will be held again in September 2010. A fire drill was conducted on the 11-7 shift to determine if staff and residents understood the procedure thoroughly. Office manager & office staff will schedule annual fire safety inservice and insure that all staff have received their annual training. Office staff will also monitor attendance & provide documentation of attendance. Monthly updates will be given to Administrator.	Steps have been taken to correct violation; full compliance is not verifiable <i>9-29-10 JH</i> Date Initials (DPW)

RECEIVED

AUG 17 2010

SCRANTON FIELD OFFICE
Adult Residential Licensing

VIOLATION REPORT

PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME St. Mary's Villa Residence, 1 Pioneer Place, Moscow, Pennsylvania 18444		CURRENT LICENSE NUMBER 203900	
INSPECTION DATE(S) (Include all dates of the inspection) June 18, 2010		REGIONAL REPRESENTATIVE Betty Bloch and Florence Babiarz	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Annette Chiekey - Administrator</i>			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Annette Chiekey</i>		DATE <i>8/17/10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Jason Hawley</i>
			DATE <i>9-29-10</i>

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (Include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
105g-2 Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.	Located outside of the back portion of the home, the inside of the three external lint ducts were layered with lint. The ground underneath and around these external lint ducts had approximately a 3' x 3' area of lint on it. The deepest portion of it measured approximately 1.75" thick.	06/25/10	Administrator & Maintenance Dept. have developed a set schedule for monitoring and cleaning the external ductwork and surrounding areas. Safety committee has added the external ductwork to its monthly safety inspection.	<i>9-29-10 JH</i>

VIOLATION REPORT

PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME St. Mary's Villa Residence, 1 Pioneer Place, Moscow, Pennsylvania 18444		CURRENT LICENSE NUMBER 203900	
INSPECTION DATE(S) (Include all dates of the inspection) June 18, 2010		REGIONAL REPRESENTATIVE Betty Bloch and Florence Babiarz	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Annette Chickey Administrator</i>			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Annette Chickey</i>		DATE 8/17/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Jason Hurray</i>
			DATE 9-29-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
132h Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.	Interviews with residents and staff persons A, B and D, who worked the 11pm to 7am shift on 6/15/10, indicated that no residents were evacuated to either one of the two stair towers or to a public thoroughfare outside of the home when the fire alarm was activated on 6/16/10. Staff reported that the residents were evacuated to the ends of the hallways of the second and third floors, which were adjacent to the emergency exit doors leading to the stair towers. As indicated in the letter, dated 3/19/10, from Preparedness Solutions Associates, LLC, the stair towers of the home are the home's designated areas of refuge. Repeated violation – 11/16/09	06/30/10	Administrator scheduled a staff inservice with all staff on our evacuation procedure. Maintenance supervisor described each step of the procedure indicating that all residents must evacuate through the fire safe doors into the stairwells. Two way radios were purchased to assure communication among staff during evacuation and staff was instructed on their use. Residents were informed again at our resident council meeting about the evacuation procedure. A fire drill was conducted on the 11-7 shift to determine if staff and residents understood the procedure thoroughly. Office manager & office staff will schedule annual fire safety inservice and insure that all staff have received their annual training. Office staff will also monitor attendance & provide documentation of attendance.	Steps have been taken to correct violation; full compliance is not verifiable 9-29-10 Date Initials (DPW)

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Monthly updates will be given to Administrator.