

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to ST. MARY'S VILLA NURSING HOME
LEGAL ENTITY

To operate ST. MARY'S VILLA RESIDENCE
NAME OF FACILITY OR AGENCY

Located at ONE PIONEER PLACE, MOSCOW, PA 18444
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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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 68
(MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: _____

This certificate is granted in accordance with the Public Welfare 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 March 14, 2013 until March 14, 2014,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 203900

Robert E. Robinson
ISSUING OFFICER

[Signature]
DIRECTOR

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.



MAR 14 2013

Ms. Linda Kanarr, CEO
St. Mary's Villa Nursing Home
516 St. Mary's Villa Road
Elmhurst Township, 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 (Department) licensing inspection on November 20, 2012 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 Human Services Licensing so that compliance can be verified.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

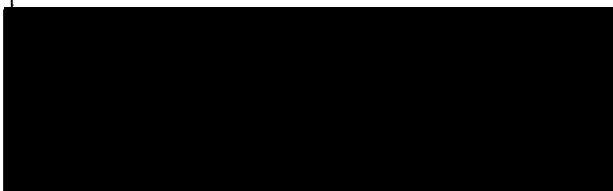
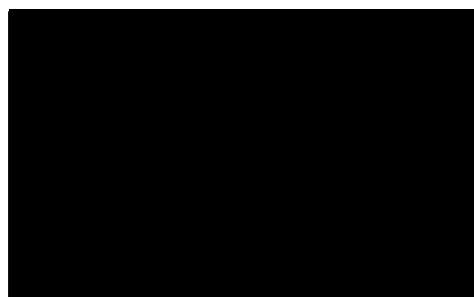
Sincerely,

A handwritten signature in black ink, appearing to read "R. Melusky".

Ronald Melusky
Director

Enclosures
License
Violation Report

**VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: ST MARY S VILLA RESIDENCE		License Number: 203900
Address: ONE PIONEER PLACE, MOSCOW, PA 18444		County: Lackawanna
Administrator: Annette Chickey		Region: NORTH
Legal Entity Name: ST MARY'S VILLA NURSING HOME		
Legal Entity Address: 516 ST. MARY'S VILLA ROAD, ELMHURST TOWNSHIP, PA 18444		
Certificate(s) of Occupancy C-2 LP 06/09/1998 Dept. of Labor and Industry		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 60	Waking Staff: 45
Type of Inspection: Ind - Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for inspection(s) Renewal, Indicator		
On-Site Inspections Dates and Department Representatives On-Site 11/20/2012: Rushin, Julianne; Yellenic, Cindy		
Off-Site Inspection Dates and Inspectors, if Applicable 		
Other Details		
Partial or Full Triggers: 225a, 25b		Random Indicators: 88b, 128c, 29b1, 251a, 164d
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 68 Number of Residents Served: 60 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: 	Number of Residents who: 	

Violation Report: 20390 - 11/20/2012 - Rushin, Julianne.
 PCH Name: ST MARY S VILLA RESIDENCE

1. REGULATION 55 Pa.Code §2600
 2600.25(b) - The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

2a. DESCRIPTION OF VIOLATION
 The contract for Resident # 1 was not signed by the resident.

3. 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.

12/18/2012 Resident #1 has signed the contract. The Administrator will take steps to assure that the Resident's signature is present on the contract. The Administrator will review the contract signature page with the resident prior to resident leaving office during the admission process. The Administrator will also show the contract to the Office Manager to verify that the resident signature is present.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Annette Chickey*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Annette Chickey Administrator* Date *12/18/12*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>2/15/13</u> (Date)	Plan of correction implementation status as of <u>2/15/13</u> (Date)
The above plan of correction was approved by <u><i>Am</i></u> (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


Violation Report: 20390 - 11/20/2012 - Rushin, Julienne
 PCH Name: ST MARY S VILLA RESIDENCE

1. REGULATION 55 Pa.Code §2600
 2600.84 - Heat sources, such as steam and hot heating pipes, water pipes, fixed space heaters, hot water heaters and radiators exceeding 120°F that are accessible to the resident must be equipped with protective guards or insulation to prevent the resident from coming in contact with the heat source.

2a. DESCRIPTION OF VIOLATION
 The electric fireplace in the first floor living room, has a circulating air flow through heated pipes at the top, front of the fireplace. When the fan is on to circulate the heated air the temperature of the exposed pipes was 242 degrees F. There is no protective covering over the pipes to prevent residents from burning themselves.

3. 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.

12/18/2012 The fan on the fireplace in the first floor living room has been disconnected so that the fireplace is just for decoration and does not function as a source of heat.
 12/18/2012 All future purchases of equipment or furniture made by the Marketing Director or the Administrator will be reviewed with the Maintenance Department to assure that there is nothing electrical that will be a source of heat attached to the equipment or furniture.
 12/18/2012 - 6/30/2013 Maintenance will document that an item has been examined and safe for the facility.

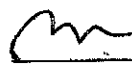
* The administrator will monitor for ongoing compliance -

 2/15/13

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) 

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <u>Annette Chickey Administrator</u>	Date <u>12/18/12</u>
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Violation Report: 20390 - 11/20/2012 - Rushin, Julianne
 PCH Name: ST MARY S VILLA RESIDENCE

1. REGULATION 55 Pa.Code §2600
 2600.103(e) - Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

2a. DESCRIPTION OF VIOLATION
 The third floor kitchen, for the residents, had a container of Mango Chobani yogurt with no name on it, and it expired on 10-30-12. The third floor kitchen, for the residents, had a Jar of Weis Spaghetti sauce, half full, with no name on it, when it was opened, and it had what appeared to be mold growing on the leftover sauce.

3. 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.

11/20/2012 The Mango Chobani Yogurt and the Weis Spaghetti sauce were disposed of on the day of inspection.
 12/18/2012 Personal Care Attendants have been instructed and will check the refrigerators on second and third floor kitchenettes on a weekly basis.
 Documentation of the weekly checks will be done by the Personal Care Attendants and the Nursing Supervisor will do random checks on the refrigerators and report to Administration.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Annette Chickery*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Annette Chickery Administrator* Date *12/18/12*

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Violation Report: 20390 - 11/20/2012 - Rushin, Julienne
 PCH Name: ST MARY S VILLA RESIDENCE

1. REGULATION 55 Pa.Code §2600
 2600.105(g)(1) - To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.

2a. DESCRIPTION OF VIOLATION
 The commercial size dryer in the first floor laundry room, had a ¼ in. of lint across the lint trap.

3. 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.

11/21/2012 Personal Care Attendants will continue to document cleaning the lint traps after each load as they have always done.
 12/18/2012 Housekeeping Staff will monitor the PCA's daily and document their findings.
 12/18/12 and ongoing Daily forms will be submitted to the Administrator. Appropriate disciplinary measures will be taken by Administration when this system of checks and balances is violated.

* The administrator will monitor for ongoing compliance.
 m
 2/15/13

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page) *Annette Chickey*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Annette Chickey Administrator* Date *12/18/12*

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Violation Report: 20390 - 11/20/2012 - Rushin, Julianne
 PCH Name: ST MARY S VILLA RESIDENCE

1. REGULATION 55 Pa.Code §2600
 2600.125(a) - Combustible and flammable materials may not be located near heat sources or hot water heaters.

2a. DESCRIPTION OF VIOLATION
 On the day of inspection, Department Representative noted a 5 gallon plastic container 1/4 filled with oil on the floor of the boiler room in close proximity the boiler's flame.

3. 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.

11/20/2012 The 5 gallon bucket was removed from the boiler room the day of inspection.
 11/21/2012 Maintenance completed a thorough cleaning of the boiler room.
 12/18/2012 and ongoing The Maintenance Department will do monthly checks with documentation to assure that there is nothing hazardous or unsafe near the boiler's flame.
 12/18/2012 and ongoing The Administration will also do monthly checks of the boiler room area to assure that the area is free of anything unsafe.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Annette Chickey*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Annette Chickey Administrator* Date *12/18/12*

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The above plan of correction is approved as of 2/15/13
 (Date)

Plan of correction implementation status as of 2/15/13
 (Date)

The above plan of correction was approved by *M*
 (Initials)

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

Violation Report: 20390 - 11/20/2012 - Rushin, Julianne
 PCH Name: ST MARY S VILLA RESIDENCE

1. REGULATION 55 Pa.Code §2600

2600.144(c)(1) - Proper safeguards inside and outside of the home to prevent fire hazards involved in smoking, including providing fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the home, extinguishing procedures, fire resistant furniture both inside and outside the home and fire extinguishers in the smoking rooms.

2a. DESCRIPTION OF VIOLATION

On the day of inspection, Department Representative noted 2 cigarette butts in dry leaves on the floor of the home's designated wooden "Smoking Hut" and 9 cigarette butts in the dry leaves below the home's loading dock which is not a designated smoking area.

3. 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.

11/21/2012 Cigarette butts along with the leaves were removed from the designated smoking area.

1/1/2013 The St. Mary's Villa Campus will become completely smoke free. The designated smoking area will no longer be available. Anyone caught smoking on the grounds will be subject to disciplinary action.

The administrator will monitor for ongoing compliance -

Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page)			
<i>Annette Chickey</i>			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)			Date
<i>Annette Chickey Administrator</i>			<i>12/18/12</i>
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<i>2/15/13</i> (Date)		<i>2/15/13</i> (Date)	
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<i>MC</i> (Initials)			

Violation Report: 20390 - 11/20/2012 - Rushin, Julianne
 PCH Name: ST MARY S VILLA RESIDENCE

1. REGULATION 55 Pa.Code §2600
 2600.225(a) - A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

2a. DESCRIPTION OF VIOLATION
 Resident # 1's, date of admission 10/17/2012, Assessment and Support Plan, as of 11/20/2012, does not have a completed Assessment.

3. 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.
 11/21/2012 The assessment for Resident Number one was completed and signed by the resident.
 12/18/2012 The Nursing Supervisor will continue to complete the RASPs thoroughly and in a timely manner to assure compliance and keep a list of those completed upon admission and annually.
 12/18/2012 Administrator will check with the Nursing Supervisor monthly to assure compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Annette Chickey*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Annette Chickey Administrator* Date *12/18/12*

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