



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**Sent via email to: mperlok@stmarysvilla.com**  
**MAILING DATE: June 9, 2019**

Ms. Nancy Newcomb  
Chief Executive Officer/President  
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  
License #: 203900

Dear Ms. Newcomb:

As a result of the Department's Bureau of Human Services Licensing inspection on January 24, 2019 of the above facility, the citations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations 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.

Sincerely,

A handwritten signature in black ink that reads "Anne Graziano".

Anne Graziano  
Human Services Licensing Supervisor

Enclosure  
Violation Report



**Violation Report:** 20390 - 01/24/2019 - Harvey, Jason  
**PCH Name:** ST MARY S VILLA RESIDENCE

**1. REGULATION 55 Pa.Code §2600**  
 2600.183(d) - Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home

**2a. DESCRIPTION OF VIOLATION**

Resident #1's prescription of Polyethylene Glycol powder expired on 10/18.  
 Resident #2's prescription of Polyethylene Glycol powder expired on 12/18.  
 Resident #3's prescription of Mapap 500mg expired on 12/4/18.  
 Resident #4's prescription of Mapap 325mg expired on 10/24/18.

**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.*

The identified medications were immediately removed from the medication cart, and both facility medication carts were audited to ensure only current medications were being kept.

Facility Administrator and Nursing Supervisor have been making weekly medication cart audits to ensure only current medications are being kept. Night shift staff have also been assisting by completing ongoing audits during the shift.

All staff will be reinserviced on the importance of ensuring only current medications are present in the medication carts.

<b>Repeat Violation:</b> No	<b>Date(s) of Previous Violation(s):</b>			
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**Signature of Legal Entity Representative**  
 (Required on EVERY Page) 

<b>Printed Name and Title of Legal Entity Representative</b> (Required on EVERY Page) Michael Perlock - Administrator	<b>Date</b> 2/27/2019
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of <u>5-16-19</u> (Date)  The above plan of correction was approved by <u>AG</u> (Initials)	Plan of correction implementation status as of <u>5-16-19</u> (Date)  <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
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**RESIDENT PRIVACY CODING DOCUMENT  
PERSONAL CARE HOMES - 55 Pa. Code Chapter 2600**

<b>PCH Name:</b> ST MARY S VILLA RESIDENCE	<b>License Number:</b> 203900
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<u>Designation</u>	<u>Resident's Name</u>
Resident 1	██████████
Resident 2	██████████
Resident 3	██████████
Resident 4	██████████

Michael Perlock Administrator  
**Printed Name and Title of Legal Entity Representative**

  
**Signature of Legal Entity Representative**

2/27/2019  
**Date**