

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

June 12, 2025

[REDACTED]
ST. ANNE HOME INC
[REDACTED]

RE: VILLA ANGELA AT ST. ANNE HOME
685 ANGELA DRIVE
GREENSBURG, PA, 15601
LICENSE/COC#: 42804

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/26/2025 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: VILLA ANGELA AT ST. ANNE HOME **License #:** 42804 **License Expiration:** 08/15/2025
Address: 685 ANGELA DRIVE, GREENSBURG, PA 15601
County: WESTMORELAND **Region:** WESTERN

Administrator

Name: [REDACTED] **Phone:** [REDACTED] **Email:** [REDACTED]

Legal Entity

Name: ST. ANNE HOME INC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-1 **Date:** 12/01/2010 **Issued By:** City of Greensburg

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 42 **Waking Staff:** 32

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 03/26/2025

Inspection Dates and Department Representative

03/26/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 54 **Residents Served:** 36

Secured Dementia Care Unit

In Home: No **Area:** **Capacity:** **Residents Served:**

Hospice

Current Residents: 7

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 36
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 1
Have Mobility Need: 6 **Have Physical Disability:** 0

Inspections / Reviews

03/26/2025 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 04/26/2025

05/07/2025 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 05/27/2025
Reviewer: [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 05/28/2025

Inspections / Reviews *(continued)*

06/12/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/27/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

141b1 - Annual Medical Evaluation

1. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident [REDACTED] medical evaluation that was signed on [REDACTED] was not dated. The spaces labeled "Date Resident Evaluated" and "Date Form Completed" were blank.

REPEAT VIOLATION: [REDACTED] et. al., [REDACTED]

Plan of Correction

Accept [REDACTED] - 05/06/2025)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 03/26/2025 by the Administrator to correct the blanks on the DME with date and initials (see attached).

To enhance the current compliant operations, starting on 04/22/2025 the Resident Care Coordinator will perform bi-weekly DME audits (see attached form), with a completion date of 05/22/2025.

Effective 04/22/2025 the Resident Care Coordinator will perform bi-weekly DME audits through 05/22/2025 to maintain ongoing compliance with ensuring each resident has a medical evaluation at least annually. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 05/22/2025

Implemented [REDACTED] 06/12/2025)

182c - Medication Administration

2. Requirements

2600.

182.c. Medication administration includes the following activities, based on the needs of the resident:

1. Identify the correct resident.
2. If indicated by the prescriber's orders, measure vital signs and administer medications accordingly.
3. Remove the medication from the original container.
4. Crush or split the medication as ordered by the prescriber.
5. Place the medication in a medication cup or other appropriate container, or in the resident's hand.
6. Place the medication in the resident's hand, mouth or other route as ordered by the prescriber, in accordance with the limitations specified in subsection (b)(4).
7. Complete documentation in accordance with § 2600.187 (relating to medication records).

Description of Violation

Resident [REDACTED] annual assessment and support plan dated [REDACTED] and [REDACTED] indicate that direct care staff members must administer all of the resident's prescribed medications. However, resident [REDACTED] was prescribed [REDACTED] [REDACTED] - 1 tablet 3 times a day, [REDACTED] - 1 tablet 2 times a day, and [REDACTED] - ½ tablet 4 times a day. These medications were not administered on [REDACTED] at 4:00PM. Staff placed the medications next to the resident's bed and did not ensure the resident took the medication. These same medications were found by staff on the morning of [REDACTED] in the same place they were left.

182c - Medication Administration (continued)

Plan of Correction**Accept** [REDACTED] - 05/07/2025)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 03/06/25 by the Administrator reviewing this medication error with the appropriate agency staff and disciplinary action occurred. Resident was assessed and was in stable condition. The resident's doctor was also notified.

To enhance the current compliant operations, starting on 04/22/2025 the Resident Care Coordinators will complete an observed medication pass weekly (see attached form) with the administrator. The administrator will educate and review the 5 rights of medication with the Resident Care Coordinator, with a completion date of 05/22/2025.

Effective 04/22/2025 the Resident Care Coordinator will complete their 5 rights of medication before medication administration. This will occur through 05/22/2025 and thereafter, to maintain ongoing compliance with ensuring medication administration includes the following activities, based on the needs of the resident. This includes, including identifying the correct resident, and if indicated by the prescriber's orders, measure vital signs and administer medications accordingly, and removing the medication from the original container, and crushing or splitting the medication as ordered by the prescriber, and placing the medication in a medication cup or other appropriate container, or in the resident's hand, and placing the medication in the resident's hand, mouth or other route as ordered by the prescriber, in accordance with the limitations specified in subsection (b)(4), and completing documentation in accordance with § 2600.187 (relating to medication records). Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 05/22/2025

Implemented [REDACTED] 06/12/2025)

185a - Implement Storage Procedures

3. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

According to the home's medication administration policy "The oncoming Med RCC will sign off meds with off going RCC after report with the off going shift. There will be 2 RCC's signing the count sheets." Several staff members reported that they frequently counted and documented narcotics counts without a second staff member present.

185a - Implement Storage Procedures (continued)

Plan of Correction

Accept [REDACTED] - 05/07/2025)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 04/08/2025 by the Administrator who educated the Resident Care Coordinators at the mandatory nursing meeting on the importance of two staff members counting together. (meeting notes attached).

To enhance the currently compliant operations, starting on 04/22/2025 the Administrator will watch narcotic count between 2 staff members twice weekly and document (form attached). The administrator will also spot check narcotic signatures weekly to ensure 2 staff members are signing that they counted, with a completion date of 05/22/2025.

Effective 04/22/2025 the Administrator will perform a narcotic count audit twice weekly through 05/22/2025 to maintain ongoing compliance with ensuring the home will develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 05/22/2025

Implemented [REDACTED] - 06/12/2025)

187b - Date/Time of Medication Admin.

4. Requirements

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

Resident [REDACTED] was prescribed [REDACTED] – 2 capsules every 6 hours. This medication was not administered on [REDACTED] at 12:00PM. Resident [REDACTED] was also prescribed [REDACTED] – 1-1/2 tablets 3 times a day and [REDACTED] – 1 capsule 3 times a day. These medications were not administered on [REDACTED] at 2:00PM; however, resident [REDACTED]'s March 2025 medication administration record (MAR) was initialed by a staff member as if the medication was administered.

Resident [REDACTED] was prescribed [REDACTED] – 1 tablet 3 times a day, [REDACTED] – 1 tablet 2 times a day, and [REDACTED] – ½ tablet 4 times a day. These medications were not administered on [REDACTED] at 4:00PM; however, resident [REDACTED]'s March 2025 MAR was initialed by a staff member as if the medication was administered.

Plan of Correction

Accept [REDACTED] - 05/07/2025)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 04/08/2025 by the Administrator by holding a meeting to review medication errors and ways to improve performance. (see attached sign-in sheet and agenda)

To enhance the current compliant operations, starting on 04/22/2025 the Resident Care Coordinators will complete an observed medication pass weekly with the administrator. Findings will be documented (form attached). The administrator will spot check MARS weekly to check for compliance (see attached).

187b - Date/Time of Medication Admin. (continued)

Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 05/22/2025

Implemented [REDACTED] 06/12/2025)

187d - Follow Prescriber's Orders**5. Requirements**

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident [REDACTED] was prescribed [REDACTED] – 2 capsules every 6 hours. This medication was not administered on [REDACTED] at 12:00PM. Resident [REDACTED] was also prescribed [REDACTED] – 1-1/2 tablets 3 times a day and [REDACTED] – 1 capsule 3 times a day. These medications were not administered on [REDACTED] at 2:00PM.

Resident [REDACTED] was prescribed [REDACTED] 1 tablet 2 times daily. This medication was not administered on [REDACTED] at 11:00PM.

Resident [REDACTED] was prescribed [REDACTED] – 1 tablet 3 times a day, [REDACTED] – 1 tablet 2 times a day, and [REDACTED] – ½ tablet 4 times a day. These medications were not administered on [REDACTED] at 4:00PM.

Plan of Correction

Accept [REDACTED] - 05/07/2025)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 03/6/2025 by the Administrator by reviewing the medication errors with the appropriate staff and disciplinary action occurred. The residents were assessed and were in stable condition. The resident's doctors were also notified.

To enhance the current compliant operations, starting on 04/22/2025 the Resident Care Coordinators will complete an observed medication pass weekly with the administrator. The administrator will educate and review the 5 rights of medication with the Resident Care Coordinator, with a completion date of 05/22/2025. Effective 04/22/2025 the Resident Care Coordinator will complete their 5 rights of medication before medication administration. This will occur through 05/22/2025 and thereafter, to maintain ongoing compliance with ensuring medication administration includes the following activities, based on the needs of the resident. This includes, including identifying the correct resident, and if indicated by the prescriber's orders, measure vital signs and administer medications accordingly, and removing the medication from the original container, and crushing or splitting the medication as ordered by the prescriber, and placing the medication in a medication cup or other appropriate container, or in the resident's hand, and placing the medication in the resident's hand, mouth or other route as ordered by the prescriber, in accordance with the limitations specified in subsection (b)(4), and completing documentation in accordance with § 2600.187 (relating to medication records). Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes, with a completion date of 05/22/2025.

187d - Follow Prescriber's Orders (*continued*)

Licensee's Proposed Overall Completion Date: 05/22/2025

Implemented [REDACTED] - 06/12/2025)