

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

January 6, 2026

[REDACTED]
MARIA HALL, INC.
[REDACTED]
[REDACTED]

RE: MARIA HALL
190 MARIA HALL DR., 3RD FLOOR
DANVILLE, PA, 17821
LICENSE/COC#: 21521

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/16/2025 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: MARIA HALL License #: 21521 License Expiration: 11/08/2026
 Address: 190 MARIA HALL DR., 3RD FLOOR, DANVILLE, PA 17821
 County: MONTOUR Region: NORTHEAST

Administrator

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

Legal Entity

Name: MARIA HALL, INC.
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 03/26/1998 Issued By: L & I
 Type: I-2 Date: 05/24/2018 Issued By: L & I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 16 Waking Staff: 12

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint Exit Conference Date: 10/29/2025

Inspection Dates and Department Representative

10/16/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 36 Residents Served: 16
 Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:
 Hospice
 Current Residents: 1
 Number of Residents Who:
 Receive Supplemental Security Income: 16 Are 60 Years of Age or Older: 16
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

10/16/2025 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 12/04/2025

12/17/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 12/19/2025
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 12/19/2025

Inspections / Reviews *(continued)*

01/06/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/19/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

17 - Record Confidentiality

1. Requirements

2600.

17. Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

Description of Violation

On [REDACTED], at approximately 3:00 p.m., An email containing correspondence between Resident [REDACTED] and Staff Person A was posted on a bulletin board in the hallway of the home and was unlocked, unattended, and accessible. The personal email addressed concerns brought forth by the resident and included information regarding the resident requesting a medical test which could be accessed by staff, residents and visitors to the home.

Plan of Correction

Accept ([REDACTED] - 12/17/2025)

The email was removed that night. Administrator and Director of Resident Care instructed staff to use the private communication system within the EMAR. Use of this tool ensures confidentiality, limiting those who have access to the message. DRC is responsible for monitoring the system. Employees continue to receive education on maintaining confidentiality and respecting residents' rights at monthly staff meetings conducted by DRC and attended by Administrator.

Licensee's Proposed Overall Completion Date: 12/04/2025

Implemented ([REDACTED] - 01/06/2026)

141b1 - Annual Medical Evaluation

2. Requirements

2600.

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

Description of Violation

Resident [REDACTED] most recent medical evaluation was completed on [REDACTED]. The resident's previous medical evaluation was completed on [REDACTED].

Plan of Correction

Accept ([REDACTED] - 12/17/2025)

In August the Director of Resident Care started to devise an electronic charting system to track all annual compliance documents. These are being added to the system to ensure continuity of resident care, as well as compliance with state regulations. Each resident's compliance is monitored by direct care staff, and appointments are made as needed and per annual requirements. Some residents make their own appointments, which happened in this case, when an appointment was canceled and rescheduled, putting compliance at risk. To ensure future compliance, the DRC will conduct monthly audits to ensure that necessary appointments are made and kept.

Licensee's Proposed Overall Completion Date: 12/04/2025

Implemented ([REDACTED] - 01/06/2026)