

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

March 9, 2026

[REDACTED]
WOLF RUN VILLAGE LLC
[REDACTED]

RE: WOLF RUN VILLAGE
3750 ROUTE 220 HIGHWAY
HUGHESVILLE, PA, 17737
LICENSE/COC#: 22149

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/30/2025, 12/31/2025 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: WOLF RUN VILLAGE License #: 22149 License Expiration: 07/24/2026
Address: 3750 ROUTE 220 HIGHWAY, HUGHESVILLE, PA 17737
County: LYCOMING Region: NORTHEAST

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: WOLF RUN VILLAGE LLC
Address: [Redacted]
Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Type: I-2 Date: 11/12/2009 Issued By: DLI

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 58 Waking Staff: 44

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Incident Exit Conference Date: 12/31/2025

Inspection Dates and Department Representative

12/30/2025 - On-Site: [Redacted]
12/31/2025 - Off-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 75 Residents Served: 55

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 3

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 55
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 3 Have Physical Disability: 1

Inspections / Reviews

12/30/2025 Partial

Lead Inspector: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 02/02/2026

02/13/2026 - POC Submission

Submitted By: [Redacted] Date Submitted: 02/27/2026
Reviewer: [Redacted] Follow-Up Type: Document Submission Follow-Up Date: 02/16/2026

Inspections / Reviews *(continued)*

03/09/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/27/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

130e - Hearing Impairment

1. Requirements

2600.

130.e. If one or more residents or staff persons are not able to hear the smoke detector or fire alarm system, a signaling device approved by a fire safety expert shall be used and tested so that each resident and staff person with a hearing impairment will be alerted in the event of a fire.

Description of Violation

Residents in rooms [redacted] and [redacted] indicated during interviews they were unable to hear the fire alarm system when it went off on [redacted] at 12:05 a.m. Both residents indicated they were alerted to the fire alarm by staff entering their rooms. The home does not have a signaling device, approved by a fire safety expert and tested to ensure that residents in rooms [redacted] and [redacted] is alerted in the event of a fire.

Plan of Correction

Accept [redacted] - 02/10/2026)

Prior to the day of inspection, the administrative staff was unaware of any hearing deficiencies with the residents in B-5 and B-6 as both residents have always evacuated without assistance during fire drills and have never had an issue hearing staff when speaking in a normal tone. Neither resident has told staff they could not hear the alarms. During the 3rd shift drill on 4/19/25 both residents evacuated without any assistance. The Administrator was working that night and participated in the drill for the hall where these rooms are located. The medical charts were checked for both residents and neither have any evidence of a hearing deficiency. The PCP was also contacted and confirmed that there are no issues with their hearing. The RASP was updated for both residents on 12/30/25. During the inspection, the alarm was activated and it was confirmed by the inspector that the alarms were functioning properly and could be heard in both rooms with the doors closed. The alarm company was contacted during the inspection to order flashing strobes/horns for both rooms as well as one extra. The horn/strobes were installed on 1/8/26 and tested on 1/12/26. Both residents evacuated without staff notifying them of the alarm. At the time of installation, the resident in B-5 asked the installer why the horn/strobe was being installed in their room and stated that they can hear the alarm without any issues. On 12/31/25, all other residents were surveyed to be sure they can hear the fire alarms when they are activated. All others confirmed they can hear the alarms. Going forward, new residents will be assessed by the administrator on admission to ensure they can hear the alarms. All staff were also instructed by 1/15/26 to let admin know immediately if there was anyone during any drill that could not hear the alarm so that a horn/strobe could be installed in their room.

Licensee's Proposed Overall Completion Date: 02/05/2026

Implemented [redacted] - 03/01/2026)