

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

May 7, 2026

[REDACTED]  
ST. MARY'S VILLA NURSING HOME  
[REDACTED]

RE: ST. MARY'S VILLA RESIDENCE  
ONE PIONEER PLACE  
MOSCOW, PA, 18444  
LICENSE/COC#: 20390

[REDACTED],  
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/26/2026 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]  
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

## Facility Information

**Name:** ST. MARY'S VILLA RESIDENCE **License #:** 20390 **License Expiration:** 03/14/2027  
**Address:** ONE PIONEER PLACE, MOSCOW, PA 18444  
**County:** LACKAWANNA **Region:** NORTHEAST

## Administrator

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

## Legal Entity

**Name:** ST. MARY'S VILLA NURSING HOME  
**Address:** [REDACTED]  
**Phone:** [REDACTED] **Email:** [REDACTED]

## Certificate(s) of Occupancy

**Type:** C-2 LP **Date:** 03/02/1998 **Issued By:** L & I

## Staffing Hours

**Resident Support Staff:** 42 **Total Daily Staff:** 88 **Waking Staff:** 66

## Inspection Information

**Type:** Full **Notice:** Unannounced **BHA Docket #:**  
**Reason:** Renewal **Exit Conference Date:** 03/26/2026

## Inspection Dates and Department Representative

03/26/2026 - On-Site: [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

**License Capacity:** 68 **Residents Served:** 44

## Secured Dementia Care Unit

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

## Hospice

**Current Residents:** 0

## Number of Residents Who:

**Receive Supplemental Security Income:** 0 **Are 60 Years of Age or Older:** 44  
**Diagnosed with Mental Illness:** 0 **Diagnosed with Intellectual Disability:** 1  
**Have Mobility Need:** 2 **Have Physical Disability:** 0

## Inspections / Reviews

03/26/2026 Full

**Lead Inspector:** [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 04/24/2026

04/24/2026 - POC Submission

**Submitted By:** [REDACTED] **Date Submitted:** 05/07/2026  
**Reviewer:** [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 05/07/2026

Inspections / Reviews *(continued)*

05/07/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/07/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

85d - Trash Receptacles

1. Requirements

2600.

85.d. Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

Description of Violation

At 10:05a.m., there was a half full, uncovered, unattended trash can in the shared 2nd floor men's bathroom.

Plan of Correction

Accept [redacted] - 04/24/2026)

In response to the violation on [redacted] of regulation 2600.85.d by the PA Bureau of Human service licensing, immediate action was taken on 03/26/26 by housekeeping to remove the uncovered trash can and replace it with a covered trash can. Additionally, signs will be placed in shared areas of the building that trash cans must have a cover on them. All staff will be provided with a training on proper waste management procedures to include covered receptacles in shared bathrooms starting on 04/27/26. Trash cans will be monitored daily by housekeeping starting 03/27/26 to ensure they remain covered. Monthly audits will be conducted starting 5/1/26 by housekeeping manager. Ongoing compliance will be monitored by by administrator.

Licensee's Proposed Overall Completion Date: 05/08/2026

Implemented [redacted] - 05/07/2026)

86a - Ventilation

2. Requirements

2600.

86.a. All areas of the home that are used by the resident shall be ventilated. Ventilation includes an operable window, air conditioner, fan or mechanical ventilation that ensures airflow.

Description of Violation

At 9:45a.m., the men's and women's public bathrooms located near the reception desk had an exhaust fan that was inoperable and had no window or other source of ventilation.

At 10:06a.m., the men's and women's public bathrooms located near room [redacted] had an exhaust fan that was inoperable and had no window or other source of ventilation.

Plan of Correction

Accept [redacted] - 04/24/2026)

In response to the violation on [redacted] of regulation 2600.86.a. by the PA Bureau of Human service licensing, immediate action was taken on 03/26/26 by Maintenance to assess for repairs and order necessary equipment for the repairs. The equipment needed was ordered and repairs will be completed by 5/8/26. Additionally, an immediate audit was conducted of all bathrooms for any inoperable vents by maintenance, none were found. A staff training will be held for all staff by Administrator starting 4/27/26 to include the importance submitting a work order to maintenance for repairs of any equipment in or outside of the building that is not in proper working order. A monthly audit starting 5/1/26 will also be conducted by maintenance to ensure all exhaust systems are cleaned and serviced to identify any existing or potential issues. ongoing compliance will be monitored by the Administrator.

Licensee's Proposed Overall Completion Date: 05/08/2026

Implemented [redacted] - 05/07/2026)

103i - Outdated Food

3. Requirements

2600.  
103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation

At 1:55p.m., a dented can of jellied cranberry sauce was found in the home's pantry.

Plan of Correction

Accept [REDACTED] - 04/24/2026)

In response to the violation on [REDACTED] of regulation 2600.103.i. by the PA Bureau of Human service licensing, immediate action was taken on 03/26/26 by the dietary manager was to remove and discard the dented can. Additionally, an immediate inspection was conducted to identify and remove any additional damaged items. No other damaged items were found. A training will be provided to dietary staff by the dietary manager starting on 4/27/2026 to include identifying a damaged item and how to properly discard damaged or spoiled food. Staff will monitor the pantry daily for any dented or damaged items starting 03/27/26 and monthly audits will be conducted monthly by dietary manager to ensure damaged items are being discarded starting 5/1/26. Ongoing compliance will be monitored by the Administrator.

Licensee's Proposed Overall Completion Date: 05/08/2026

Implemented [REDACTED] - 05/07/2026)

105g - Lint Removal and Duct Cleaning

4. Requirements

2600.  
105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

Description of Violation

At 9:40a.m., there was an approximate 1/4-inch accumulation of lint in the lint trap of the commercial dryer. There were no clothes in the dryer at the time.

Plan of Correction

Accept [REDACTED] - 04/24/2026)

In response to the violation on [REDACTED] of regulation 2600.105.g. by the PA Bureau of Human service licensing, immediate action was taken on 03/26/26 by maintenance to remove the lint from the dryer and inspect the other dryers for any lint. Staff immediately re educated verbally by the DOW on the importance of removing lint from the dryer after each use. A written re education will also be provided by the Administrator to All staff starting on 4/27/26 to include proper cleaning of the lint traps between each use, weekly cleaning of the lint traps and ducts and signing the log with date and time of each cleaning in between uses. Housekeeping will monitor log daily and that the lint trap is being cleaned properly starting 03/27/26. Maintenance will continue to clean lint traps and ducts weekly. A monthly Audit starting 5/1/26 will be conducted by maintenance to ensure all procedures are being conducted properly and that lint traps are clean. Ongoing compliance will be monitored by the Administrator.

Licensee's Proposed Overall Completion Date: 05/08/2026

Implemented [REDACTED] - 05/07/2026)

121a - Unobstructed Egress

5. Requirements

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

At 9:55a.m., the double doors located in the dining room could not be opened without use of excessive force blocking egress from the dining room.

Plan of Correction

Accept (████ - 04/24/2026)

In response to the violation on █████ of regulation 2600.121.a. by the PA Bureau of Human service licensing, immediate action was taken on 03/26/26 by maintenance was to inspect the double doors in the dining room to determine the cause of the obstruction. The door Mechanisms noted to be misaligned on the door. Maintenance made a temporary adjustment to require less force to open the door. Additionally, called High mountain hardware INC. to come and assess the door and make the necessary repairs. Repairs made on 04/1/2026 and the door opens easily. A Staff training will be conducted by the Administrator on the importance of submitting a work order to maintenance if an egress route is obstructed starting 4/27/26. Maintenance will conduct a monthly audit of all areas of egress to ensure their are no obstructions or repairs needed of any exits to start on 5/1/26. ongoing compliance will be monitored by the administrator.

Licensee's Proposed Overall Completion Date: 05/08/2026

Implemented █████ 05/07/2026)

141b1 - Annual Medical Evaluation

6. Requirements

2600.

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

Description of Violation

The medical evaluation for resident █████ dated █████ does not include if the resident needs can be met by the personal care home or if the resident would require care in a skilled nursing facility.

Plan of Correction

Accept (████ - 04/24/2026)

In response to the violation on █████ of regulation 2600.141b1 by the PA Bureau of Human service licensing, immediate action was taken on 03/26/26 by the Director of Wellness was to contact the resident's PCP to make the correction to the medical evaluation. Corrected Medical evaluation stating that resident's needs can be met by the personal care home was received on 3/27/26. An audit was performed by the DOW of all resident medical evaluations to ensure all areas of the evaluation have been completed. No further errors or exclusions were found. A monthly audit by the DOW starting 5/1/26 of all medical evaluations to ensure all areas of the document are completed. ongoing compliance will be monitored by the administrator.

Licensee's Proposed Overall Completion Date: 05/08/2026

Implemented █████ - 05/07/2026)

187a - Medication Record

7. Requirements

187a - Medication Record (continued)

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

**Description of Violation**

The narcotic log read resident [REDACTED] take 1 tab every 8 hours as needed for sever pain. The medication order states take every 6 hours as needed.

**Plan of Correction**

Accept [REDACTED] - 04/24/2026)

In response to the violation on [REDACTED] of regulation 2600.187.a. by the PA Bureau of Human service licensing, immediate action was taken on 03/26/26 by the DOW was to review and verify the physicians order. Once the order was verified the DOW made the correction in the narcotic log. Additionally, resident [REDACTED] MAR was reviewed to ensure the medication was being given properly per the order. No medication errors were found. DOW reviewed all of the medication count logs in both narcotic books to ensure all logs matched the physicians orders. No other discrepancies were noted. Staff education will be provided to all med techs and nurses starting on 4/27/26 to include proper documenting of physician orders on to narcotic log. DOW will conduct a monthly audit starting 5/1/26 of the Narcotic log to ensure the medication instructions match the physician order. Ongoing compliance will be monitored by the administrator.

Licensee's Proposed Overall Completion Date: 05/08/2026

Implemented ([REDACTED] - 05/07/2026)