

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

October 9, 2026

[REDACTED], PRESIDENT/CEO
ST STEPHENS LIVING CENTER LLC
1075 CHESTNUT STREET
NANTY GLO, PA, 15943

RE: ST STEPHEN'S LIVING CENTER
1075 CHESTNUT STREET
NANTY GLO, PA, 15943
LICENSE/COC#: 32736

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/25/2026 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]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: ST STEPHEN'S LIVING CENTER

License #: 32736

License Expiration: 04/20/2027

Address: 1075 CHESTNUT STREET, NANTY GLO, PA 15943

County: CAMBRIA

Region: CENTRAL

Administrator

Name: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Legal Entity

Name: ST STEPHENS LIVING CENTER LLC

Address: 1075 CHESTNUT STREET, NANTY GLO, PA, 15943

Phone: [REDACTED]

Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP

Date: 09/22/1998

Issued By: Dept of Labor & Industry

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 13

Waking Staff: 10

Inspection Information

Type: Full

Notice: Unannounced

BHA Docket #:

Reason: Renewal, Complaint

Exit Conference Date: 08/25/2026

Inspection Dates and Department Representative

08/25/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 44

Residents Served: 13

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 10

Are 60 Years of Age or Older: 10

Diagnosed with Mental Illness: 10

Diagnosed with Intellectual Disability: 3

Have Mobility Need: 0

Have Physical Disability: 0

Inspections / Reviews

08/25/2026 Full

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 09/28/2026

09/28/2026 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/08/2026

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 10/05/2026

Inspections / Reviews (*continued*)

10/02/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/08/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 10/10/2026

10/09/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/08/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

85a - Sanitary Conditions**1. Requirements**

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

On 8/25/26, at 10:31AM, the bathroom labeled bathroom "two" had floor tiles that were separated from the floor, and the floor was dirty with a residue around the bottom of the toilet.

On 8/25/26, at 10:45AM, the bathroom labeled bathroom "three" had dried feces in the toilet bowl and the water in the toilet was black.

On 8/25/26, at 10:50AM, there were chunks of dead skin located on the top of Resident #3's dresser.

On 8/25/26, at 11:09AM, the bathroom labeled bathroom "one" had dirt and mold on the shower walls.

On 8/25/26, at 11:12AM, the bathroom labeled bathroom "four" had dirt and mold around the base of the sink.

Plan of Correction**Accept (████ - 10/02/2026)**

All staff were inserviced in regard to 2600.85.a on 09/19/2026. Bathroom labeled two was thoroughly cleaned the day of the inspection. New flooring is currently being placed in bathroom two and should be completed 09/27/2026. Bathroom labeled three was thoroughly cleaned on the day of the inspection. The dead skin on top of resident #3's dresser was removed and put in the trash on the day of the inspection. The shower walls in the bathroom labeled one were thoroughly scrubbed on the day of the inspection. The entire shower stall was painted with a paint suitable to such surfaces on 09/23/2026. The dirt and mold around the base of the sink in the bathroom labeled 4 was thoroughly cleaned on 09/26/2026. The vanity in bathroom labeled 4 is to be painted with a completion date of 10/10/2026. All bathrooms will continue to be cleaned thoroughly nightly and as needed on all shifts. Resident #3's bedroom will be checked often on all shifts for chunks of dead skin and be cleaned accordingly. All bathrooms and bedrooms will be checked daily. The administrator and/or the designees will monitor for compliance. Daily audits began on 09/28/2026. Staff on duty are checking the bedrooms and bathrooms. The administrator will ensure that these rounds are being done.

Proposed Overall Completion Date: 10/10/2026

Licensee's Proposed Overall Completion Date: 10/10/2026

Implemented (████ - 10/09/2026)**85b - Infestation****2. Requirements**

2600.

85.b. There may be no evidence of infestation of insects or rodents in the home.

Description of Violation

On 8/25/26, at 9:19AM, Resident #2 was laying on █████ bed when a live bed bug was found crawling on █████ bed sheet.

On 8/25/26, at 10:33AM, there were mice feces located between sink and dishwasher.

85b Infestation (continued)

On 8/25/26, at 11:10AM, resident room #12 had mice feces in closet.

On 8/25/26, at 11:14 AM resident room #13 had mice feces in the closet.

Plan of Correction

Accept () - 10/02/2026

All staff were inserviced in regard to 2600.85.b on 09/19/2026. The live bed bug was eliminated and the sheet changed on resident #2's bed the day of the inspection. The mice feces between the sink and dishwasher was cleaned out the day of the inspection, as well as the mice feces vacuumed out of the closets in resident rooms #12 and #13. All resident will be checked daily for live bed bugs or signs of such. Bed bug spray will be used as needed in any area where the bed bugs may be found. Constant monitoring will be done to ensure there is no mice infestation occurring in the home. If should become necessary at any time, an exterminator will be called in to handle the infestation. The administrator and/or the designees will monitor for compliance.

Daily audits for bed bugs began on 08/26/2026 and are being done by the staff on duty. Pest Control was on site on 09/29/2026. Bed bug evidence was found in Resident rooms 1,4, and 5. Treatment of those rooms were completed that day by their tech . A follow up inspection is scheduled for October 20,2026. also checked for rodents and observed no evidence of rodents at this time. Audits for rodent infestation will also be done daily starting 09/28/2026 and being done by staff on duty. If a rodent infestation is found Pest Control will be called in to treat the infestation. The administrator will ensure all steps are being done.

Licensee's Proposed Overall Completion Date: 10/10/2026

Implemented () - 10/08/2026

86a - Ventilation**3. 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

On 8/25/26, at 12:51PM, there were two vents located in the electrical room covered with a layer dust., impeding airflow.

Plan of Correction

Accept () - 10/02/2026

All staff were inserviced in regard to 2600.86.a on 09/19/2026. The two vents were cleaned the day of the inspection and replaced on 09/03/2026. The vents will be checked on a monthly basis and be changed every six months or if needed prior to the six month period. The administrator and/or the designees will monitor for compliance. Monthly audits will begin on October 3,2026 and be done on the 3rd of each subsequent month. The staff on duty will be responsible for doing the checks. The vents are due to be changed on March 3, 2027 or sooner if they should become dusty before that date. The administrator will ensure these steps are completed.

Licensee's Proposed Overall Completion Date: 10/10/2026

Implemented () - 10/09/2026

88a - Surfaces**4. Requirements**

2600.

88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

88a Surfaces (continued)**Description of Violation**

On 8/25/26, at 10:32AM, the kitchen walls, floors and sink were covered in dirt.

On 8/25/26, at 11:14AM, resident room #13 had dirt covering the floors and walls.

Plan of Correction

Accept () - 10/02/2026

All staff were inserviced in regard to 2600.88.a on 09/19/2026. The kitchen walls, floor, and sink were thoroughly cleaned on 09/07/2026. Room #13 was thoroughly cleaned on 09/04/2026. On 09/16/2026, all staff were oriented to a new cleaning schedule for all shifts. Resident room #13 will have the walls painted. The kitchen walls are currently being painted to be finished by 10/10/2026. The administrator and/or the designees will monitor all areas to ensure that the cleaning schedules are being done on all shifts. The administrator and/or the designees will monitor for compliance. Daily audits began on 09/28/2026 and are being done by the staff on duty. The administrator will ensure these steps are being done.

Licensee's Proposed Overall Completion Date: 10/10/2026

Implemented () - 10/09/2026

95 - Furniture and Equipment**5. Requirements**

2600.

95. Furniture and Equipment - Furniture and equipment must be in good repair, clean and free of hazards.

Description of Violation

The furniture located in the sitting area was dirty and in poor condition.

Plan of Correction

Accept () - 10/02/2026

All staff were inserviced in regard to 2600.95 on 09/19/2026. The worst of the furniture was removed from the sitting area and replaced with other furniture in better condition found throughout the home. Constant monitoring of the furniture will be done by the administrator and/or the designees and replaced as needed. The administrator and/or the designees will monitor for compliance. Daily audits of the furniture started on 09/28/2026 and are being done by the staff on duty. The administrator will ensure this audit is being done.

Licensee's Proposed Overall Completion Date: 10/10/2026

Implemented () - 10/09/2026

101j3 - Bed/Linens/Pillows/Blankets**6. Requirements**

2600.

101.j. Each resident shall have the following in the bedroom:

3. Pillows, bed linens and blankets that are clean and in good repair.

Description of Violation

On 8/25/26, at 11:02AM, Resident #5's sheets were dirty and stained.

On 8/25/26, at 11:09AM, Resident #4 sheets were dirty and stained.

On 8/25/26, at 11:11AM, Resident #6 and Resident #7 sheets were dirty and stained.

101j3 - Bed/Linens/Pillows/Blankets (continued)

On 8/25/26, at 11:14AM, Resident #8 sheets were dirty and stained.

Plan of Correction**Accept () - 10/02/2026)**

All staff inserviced in regard to 2600.101.j on 09/19/2026. All dirty and stained sheets were replaced with clean ones and the dirty and stained sheets were discarded. All linens were inspected and if dirty and in ill repair were discarded. New linens will be obtained as needed. All beds will be checked daily for acceptable linens. Linens will be changed per the shower schedule and as needed as they may become soiled prior to the shower day. The administrator and/or designees will monitor for compliance. Daily bed checks began on 09/28/2026 and are being done by the staff on duty. The administrator will ensure these checks are being done.

Licensee's Proposed Overall Completion Date: 10/01/2026

Implemented () - 10/09/2026)**101o - Walls, Floors, Ceilings****7. Requirements**

2600.

101.o. The bedrooms must have walls, floors and ceilings, which are finished, clean and in good repair.

Description of Violation

On 8/25/26, at 9:19AM, Resident #2's walls have black marks, and floors were dirty with dust particles and dark stains. There were also multiple holes in walls.

On 8/25/26, at 11:02AM, Resident #5's walls had black marks, and the floors were dirty with dust particles and dark stains.

On 8/25/26, at 11:05AM, Resident #9's ceiling tile has a dark discolored stain.

Plan of Correction**Accept () - 10/02/2026)**

All staff inserviced in regard to 2600.101.o on 09/19/2026. The floor of resident #2 were cleaned the day of the inspection. Resident #2's room will be painted and the holes patched in the following days to be completed by 10/10/2026. Resident #5's room was cleaned the day of the inspection. This room will also be painted in the coming days to be completed by 10/10/2026. Residents #9's ceiling tile was replaced the day of the inspection. Walls, floors, and ceilings will be checked on a daily basis by the administrator and/or the designees. Rooms will be cleaned per the shower schedule and as needed. The administrator and the designees will monitor for compliance. The walls, floors, and ceiling audits began on 09/28/2026 and are being done by the staff on duty. The administrator will ensure these audits are being done.

Licensee's Proposed Overall Completion Date: 10/10/2026

Implemented () - 10/09/2026)**102f - Towel/Washcloth/Soap****8. Requirements**

2600.

102.f. An individual towel, washcloth and soap shall be provided for each resident.

102f - Towel/Washcloth/Soap (continued)

Description of Violation

A common bar of soap was being used by all residents.

Plan of Correction

Accept () - 10/02/2026)

All staff inserviced in regard to 2600.102.f on 09/19/2026. On 09/21/2026 bottles of body wash was obtained for each individual resident and their initials put on the bottle. Staff will monitor the contents of each bottle and let the administrator know when the bottle is getting low so it can be replaced for that resident. The administrator will monitor for compliance. Audits began on 09/28/2026 and are being done weekly. The administrator will ensure these audits are being done.

Licensee's Proposed Overall Completion Date: 10/10/2026

Implemented () - 10/09/2026)

102g - Individual Toiletry Items

9. Requirements

2600.

102.g. Individual toiletry items including toothpaste, toothbrush, shampoo, deodorant, comb and hairbrush shall be made available to residents who are not recipients of SSI. If the home charges for these items, the charges shall be indicated in the resident-home contract. Availability of toiletry items for residents who are recipients of SSI is specified in § 2600.27(d)(1) (relating to SSI recipients).

Description of Violation

A common bottle of shampoo was being used by all residents.

Plan of Correction

Accept () - 10/02/2026)

All staff inserviced in regard to 2600.102.g on 09/19/2026. On 09/21/2026 bottles of shampoo were obtained for each individual resident and their initials put on the bottle. Staff will monitor the contents of each bottle and let the administrator know when the contents of the bottle gets low so it can be replaced for the resident. The administrator will monitor for compliance. Weekly audits began on 09/28/2026. The administrator will ensure the audits are being done.

Licensee's Proposed Overall Completion Date: 10/10/2026

Implemented () - 10/09/2026)

103b - Clean/Sanitized Kitchen Surfaces

10. Requirements

2600.

103.b. Kitchen surfaces must be of a nonporous material and cleaned and sanitized after each meal.

Description of Violation

On 8/25/26, at 10:31AM, the kitchen counter and sink were dirty and unsanitary.

Plan of Correction

Accept () - 10/02/2026)

All staff inserviced in regard to 2600.103.b on 09/19/2026. The kitchen counters and sink were cleaned and sanitized on the night of the inspection. New cleaning schedules were discussed with the staff. The sink and counter tops will be cleaned and sanitized each shift and as needed in between. The kitchen will be inspected daily by the administrator and/or designees. The administrator and/or the designees will monitor for compliance. The audits began on 09/20/2026.

Licensee's Proposed Overall Completion Date: 10/10/2026

103b - Clean/Sanitized Kitchen Surfaces (*continued*)*Implemented () - 10/09/2026)*

103d - Storing Food Off Floor

11. Requirements

2600.

103.d. Food shall be stored off the floor.

Description of Violation*On 8/25/26, at 12:52PM, a bag of potatoes was stored on the floor in the electrical room.***Plan of Correction***Accept () - 10/02/2026)**All staff inserviced in regard to 2600.103.d on 09/19/2026. The crate the potatoes were sitting on has been repaired and the potatoes are now being stored off the floor. The room will be monitored frequently by the administrator and/or designees to ensure that the potatoes are indeed off the floor. The administrator and/or designees will monitor for compliance. The audits began on 09/28/2026 and are being done twice weekly.***Licensee's Proposed Overall Completion Date:** 10/10/2026*Implemented () - 10/09/2026)*

162c - Menus Posted

12. Requirements

2600.

162.c. Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

Description of Violation*On 8/25/26, at 9:19AM, the home's menu for the week of 8/24/26 was posted. However, the home's menu for the week of 8/30/26 was not posted.***Plan of Correction***Accept () - 10/02/2026)**All staff inserviced in regard to 2600.162.c on 09/19/2026. The menu for the week of 08/30/2026 was posted the day of the inspection. Every menu thereafter has been posted in a timely fashion. The administrator and/or the designees will monitor for compliance. Menus for the following week will be posted on Saturdays. Weekly audits will be done by the administrator and/or the designees to ensure the menus are posted timely.***Licensee's Proposed Overall Completion Date:** 10/10/2026*Implemented () - 10/09/2026)*

221a - Program Activities

13. Requirements

2600.

221.a. The administrator shall develop a program of activities designed to promote each resident's active involvement with other residents, the resident's family and the community.

Description of Violation*The home does not have a program of activities designed to promote the active involvement of residents with families and the community.*

221a Program Activities (continued)

Plan of Correction**Accept () - 10/02/2026)**

The administrator refamiliarized [REDACTED] and inserviced staff in regard to 2600.221.a on 09/19/2026. A program of activities is being developed to promote family and community involvement such as Community church services for those who can and wish to go into the community to attend church services. St Mary's church ladies come every Monday to give communion to our Catholic residents. Residents who can, go to the Shop N Save or to the various dining places close to home. It will also include the Senior Activity Center for the few who want to go. The new program of activities to promote family and community involvement will be completed by 10/10/2026. The administrator will monitor for compliance. The activity calendar will be audited on a monthly basis to ensure active involvement with families and the community. Audits will begin on 10/01/2026 and be done on the first of each following month by the administrator.

Licensee's Proposed Overall Completion Date: 10/10/2026**Implemented () - 10/08/2026)**