



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to **MAGNOLIA PLACE MANAGEMENT LLC**

LEGAL ENTITY

To operate **MAGNOLIA PLACE OF SAXONBURG**

NAME OF FACILITY OR AGENCY

Located at **100 BELLA COURT, SAXONBURG, PA 16056**

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE/SERVICE LOCATION

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To provide **Personal Care Homes**

TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed **84**
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: **Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 32**

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes

(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from **January 13, 2022** until **February 20, 2022**,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **450900**


ISSUING OFFICER


DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable
and should be posted in a conspicuous place in the facility.

HS 628 – 01/21



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Emailing Date: January 14, 2022

[REDACTED]
Magnolia Place Management LLC
[REDACTED]
[REDACTED]

RE: Magnolia Place of Saxonburg
100 Bella Court
Saxonburg PA 16056
License #45090

Dear [REDACTED]:

As the result of your home's recent request to adjust the use of the physical space, the Department has granted an approval for a revised license issued under the authority of 55 Pa. Code Ch. 2600 (relating to Personal Care Homes). The approved capacity revision request is an increase from 20 to 32 in the secure dementia care unit. The expiration date of the license remains unchanged.

Any future requests for changes in capacity should be forwarded to the Department for review and consideration in accordance with the applicable regulations. The revised license is enclosed.

Sincerely,

A handwritten signature in black ink that reads "Jamie F. Buchenauer". The signature is written in a cursive, flowing style.

Jamie Buchenauer
Deputy Secretary
Office of Long-term Living

Enclosure
License

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

Facility Information

Name: *MAGNOLIA PLACE OF SAXONBURG* License #: *45090* License Expiration: *02/20/2022*
Address: *100 BELLA COURT, SAXONBURG, PA 16056*
County: *BUTLER* Region: *WESTERN*

Administrator

Name: [REDACTED] Phone: *7243522827* Email: [REDACTED]

Legal Entity

Name: *MAGNOLIA PLACE MANAGEMENT LLC*
Address: [REDACTED]
Phone: *7243522827* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *11/19/1997* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *79* Waking Staff: *59*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal, Incident* Exit Conference Date: *12/30/2021*

Inspection Dates and Department Representative

11/08/2021 - On-Site: [REDACTED]

11/09/2021 - On-Site: [REDACTED]

11/10/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *84* Residents Served: *61*

Secured Dementia Care Unit

In Home: *Yes* Area: *Level 1* Capacity: *20* Residents Served: *17*

Hospice

Current Residents: *2*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *61*
Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *3*
Have Mobility Need: *18* Have Physical Disability: *1*

Inspection Dates and Department Representative (*continued*)

Inspections / Reviews

11/08/2021 - Full

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *01/13/2022*

01/11/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *02/05/2022*

01/12/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type:

Follow-Up Date:

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

On 11/8/21 at 10:50 a.m., there was a partially full, uncovered trash can in the kitchen.

REPEAT VIOLATION: 10/5/2020 et. al.

Plan of Correction**Accept**

On 11/8/21 during the inspection the Environmental Services Director immediately removed the dining service cart trash receptacle and placed said equipment in the dumpster.

On 11/8/21 a new Tubstr 3 Shelf Service Cart with 2 Attachable Storage Bins with Lids was ordered. Equipment delivered and implemented on 11/18/21 for long-term compliance.

On 01/03/22 and 01/04/22 all Dining Service Staff re-educated on Regulation 2600.85(d) by the new Dining Services Director and Administrator.

Dining Services Director, Administrator and/or Designee will audit kitchen/dining trash receptacles on a daily basis for one month then weekly for one month to assure compliance is maintained. Documentation will be maintained.

See attached supporting documentation.

Document Submission**Implemented**

Please see attached supporting documentation related to education, proof of compliance measures and audit tool.