

Department of Human Services  
Bureau of Human Service Licensing

October 23, 2020

BEN WILLNER, OWNER  
MELODY MANOR PCH LLC  
413 NORTH MCKEAN STREET  
KITANNING, PA 16201

RE: MELODY MANOR  
413 NORTH MCKEAN STREET  
KITANNING, PA, 16201  
LICENSE/COC#: 44676

Dear Mr. Willner,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 10/20/2020 of the above facility, no regulatory citations have been identified as a result of this inspection.

Sincerely,  
Jody Garvey

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

**Facility Information**

Name: *MELODY MANOR* License #: *44676* License Expiration Date: *07/21/2021*  
 Address: *413 NORTH MCKEAN STREET, KITTANNING, PA 16201*  
 County: *ARMSTRONG* Region: *WESTERN*

**Administrator**

Name: *Marcia Williamson* Phone: *7245451564* Email: *melodymanor@comcast.net*

**Legal Entity**

Name: *MELODY MANOR PCH LLC*  
 Address: *413 NORTH MCKEAN STREET, KITTANNING, PA, 16201*  
 Phone: *7245451564* Email: *INFO@WHITESTONEHC.COM; Jogarvey@pa.gov*

**Certificate(s) of Occupancy**

Type: *Other* Date: *12/20/1983* Issued By: *L&I*  
 Type: *C-2 LP* Date: *09/28/1987* Issued By: *L&I*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *39* Waking Staff: *29*

**Inspection**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Complaint* Exit Conference Date: *10/20/2020*

**Inspection Dates and Department Representative**

*10/20/2020 - On-Site: Thomas Smith*

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *43* Residents Served: *37*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *1*

**Number of Residents Who:**

Receive Supplemental Security Income: *20* Are 60 Years of Age or Older: *28*  
 Diagnosed with Mental Illness: *27* Diagnosed with Intellectual Disability: *1*  
 Have Mobility Need: *2* Have Physical Disability: *0*

Inspections / Reviews

10/20/2020 - Partial

Lead Inspector: *Thomas Smith*

Follow-Up Type: *Not Required*

**No Deficiencies Identified**