

Department of Human Services  
Bureau of Human Service Licensing

October 28, 2021

[REDACTED]  
ABODE CARE OF MONROEVILLE LLC  
2560 STROSCHEIN ROAD  
MONROEVILLE, PA 15146

RE: ABODE CARE OF MONROEVILLE  
2560 STROSCHEIN ROAD  
MONROEVILLE, PA, 15146  
LICENSE/COC#: 45119

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/29/2021, 09/30/2021, 10/01/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Larry Mazza

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

**Facility Information**

Name: *ABODE CARE OF MONROEVILLE* License #: *45119* License Expiration Date: *08/13/2022*  
Address: *2560 STROSCHEIN ROAD, MONROEVILLE, PA 15146*  
County: *ALLEGHENY* Region: *WESTERN*

**Administrator**

Name: [REDACTED] Phone: *412-856-1588* Email: [REDACTED]

**Legal Entity**

Name: *ABODE CARE OF MONROEVILLE LLC*  
Address: *2560 STROSCHEIN ROAD, MONROEVILLE, PA, 15146*  
Phone: *3479571340* Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *I-2* Date: *06/04/2012* Issued By: *Municipality of Monroeville*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *40* Waking Staff: *30*

**Inspection**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Complaint* Exit Conference Date: *10/01/2021*

**Inspection Dates and Department Representative**

*09/29/2021 - On-Site:* [REDACTED]  
*09/30/2021 - Off-Site:* [REDACTED]  
*10/01/2021 - Off-Site:* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *66* Residents Served: *27*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *6*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *26*  
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *13* Have Physical Disability: *1*

## Inspections / Reviews

09/29/2021 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/14/2021*

10/15/2021 - POC Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/21/2021*

10/15/2021 - POC Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *10/24/2021*

10/28/2021 - Document Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Not Required*

28e - Death of a Resident

1. Requirements

2600.

28.e. In the event of a death of a resident under 60 years of age, the administrator shall refund the remainder of previously paid charges to the resident's estate within 30 days from the date the room is cleared of the resident's personal property. In the event of a death of a resident 60 years of age and older, the home shall provide a refund in accordance with the Elder Care Payment Restitution Act (35 P. S. § 10226.101—10226.107). The home shall keep documentation of the refund in the resident's record.

Description of Violation

Resident #1 passed away on resident #1's date of death, and all of the resident's personal belongings were removed from the home on the same day that resident #1 passed away. However, no refund has been issued to the resident's personal representative or guardian for previously paid charges in accordance with The Elder Care Payment Restitution Act.

Plan of Correction

Directed

1. Refund check was sent to responsible party on 10/1/2021 please see attachment 1.

2. Abode Care Management team has created a program for all parties involved to see current financial data for both active and inactive residents . Administrator will be in charge to update resident information daily. Abode Care Management team will look at data daily to acknowledge changes. Administrator is in charge to provide management with dates of discharged residents, and if resident's responsible party is owed a refund. projected goal to issue a refund check is within 30 days.

3. Administrator and Management team will review data program daily and as needed. Conduct weekly conference calls to discuss resident financials and confirm refund checks are issued to responsible parties within specified time frame.

DIRECTED: Within 10 days of receipt of the plan of correction: A designated staff person shall review the records of all residents who passed away within the past year to ensure any refunds owed have been issued to the resident's representative or guardian in accordance with the Elder Care Payment Restitution Act. [REDACTED] 10/15/21

Completion Date: 10/15/2021

Document Submission

Implemented

Documents Attached

58a - Awake Staff 16 or More

1. Requirements

2600.

58.a. If a home serves 16 or more residents, all direct care staff persons on duty in the home shall be awake at all times one or more residents are present in the home.

Description of Violation

According to interviews, staff members routinely take naps or "doze off" while on duty during the 11:00 pm to 7:00 am shift. At times, residents had to rouse a sleeping staff person for assistance.

## 58a - Awake Staff 16 or More (continued)

**Plan of Correction****Directed**

1. Members of the 11pm-7am shift were immediately notified on 9/29/2021 they are not permitted to sleep while on duty. Members of Management (Administrator, [REDACTED]) have been working along side of DCS to ensure safety of residents.

2. Night Staff meeting was held on 10/6/2021 to discuss violation and the importance of safety Please see attachment 2A. Policies and procedures were updated on 10/1/2021 to include sleeping policy a copy of the new policy has been given to all staff members . Please see attachment 2.

3. Administrator will review policies and procedures annually and as needed. Administrator and members of management team will continue to work 11p-7a shifts to guarantee all staff members are awake during their shifts .  
DIRECTED: Within 24 hours of receipt of the plan of correction: All management employees shall conduct regular rounds throughout the building on the 11:00pm-7:00am shift to ensure all staff persons are awake at all times. [REDACTED]  
10/15/21

Completion Date: 10/15/2021

**Document Submission****Implemented**

documents attached

## 190a - Completion Medication Course

**1. Requirements**

2600.

190.a. A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

**Description of Violation**

Staff person A, who has not successfully completed the Department-approved medications administration course, has administered Pro Re Nata (PRN) medications on numerous occasions over the past two months to residents #2 and #3.

## 190a - Completion Medication Course (continued)

**Plan of Correction****Accept**

1. Staff person A was trained on [REDACTED], Please see attachment 3. During [REDACTED] training with DRC and other medication techs, [REDACTED] mentioned that [REDACTED] wanted to be "as needed because it was overwhelming". Staff person A has never passed medications alone there is always at least one additional med tech on duty per shift. Only medications prescribed on overnight shift are PRN medications at this time.
2. Director of resident care/ Train the trainer will continue to conduct observations of new medication techs to ensure they are qualified to pass medications every 6 months [REDACTED] will conduct observations as needed for those who need them during daily medication passes and routine rounds. [REDACTED] will continue to re-train medication techs annually. Administrator to assist as needed.
3. DRC and Administrator will review all medication administration paperwork every 6 months, as needed and annually to confirm all medication technicians are qualified to pass or continue to pass medications

Completion Date: 10/15/2021

**Document Submission****Implemented**

documents attached