

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

December 23, 2022

[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 10/19/2022, 11/23/2022 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: *ABODE CARE OF MONROEVILLE* License #: *45119* License Expiration: *08/13/2023*
 Address: *2560 STROSCHEIN ROAD, MONROEVILLE, PA 15146*
 County: *ALLEGHENY* Region: *WESTERN*

Administrator

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

Legal Entity

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

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *54* Waking Staff: *41*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint, Incident* Exit Conference Date: *11/23/2022*

Inspection Dates and Department Representative

10/19/2022 - On-Site: [REDACTED]
 11/23/2022 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *66* Residents Served: *35*

Secured Dementia Care Unit

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

Hospice

Current Residents: *7*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *35*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *19* Have Physical Disability: *0*

Inspections / Reviews

10/19/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/07/2022*

12/08/2022 - POC Submission

Submitted By: *Jennifer Margliotti* Date Submitted: *12/22/2022*
 Reviewer: *Larry Mazza* Follow-Up Type: *POC Submission* Follow-Up Date: *12/14/2022*

Inspections / Reviews *(continued)*

12/19/2022 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/22/2022

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 12/22/2022

12/23/2022 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/22/2022

Reviewer: [REDACTED]

Follow-Up Type: Not Required

23a - Activities of Daily Living Assistance

1. Requirements

2600.

23.a. A home shall provide each resident with assistance with ADLs as indicated in the resident's assessment and support plan.

Description of Violation

On [REDACTED]/22 at approximately [REDACTED] am, staff member A was independently transferring resident #1 from [REDACTED] bed to [REDACTED] wheelchair when resident #1 fell to the ground. Resident #1 was transferred to the hospital and admitted [REDACTED]. Resident #1's most recent assessment, dated [REDACTED] 22, indicates the resident requires some physical assistance to transfer in/out of bed/chair and resident #1's most recent support plan, dated [REDACTED] 22, indicates the resident requires the assistance of 2 staff persons to transfer in/out of bed/chair.

Plan of Correction

Directed [REDACTED] - 12/19/2022)

1. Staff member A was given a written warning for failure to follow policies and placed on a one week supervision during daily rounds [REDACTED].
2. Staff meeting was held on 10/26/2022 to re-educate DCS on proper lifting techniques and current residents in the home who require two person assistance. Document created and placed in wellness room listing all residents who require two person assistance for quick reference. All new hire DCS will continue to be educated on all residents who require assistance and review RASP's. DRC will check document weekly, update as needed and inform all DCS of any changes to a resident status. DRC and Administrator will review RASP quarterly. DRC will update all RASP as needed with any changes to resident care needs. (DIRECTED: The DRC shall begin the weekly review of the list of residents who require 2-person assistance within 72 hours of receipt of the plan of correction. During the weekly reviews, the DRC shall also ensure resident assessments and support plans are updated as resident care needs change. [REDACTED] 12/19/22).
3. Daily manager rounds will continue to be completed to ensure staff and resident safety. DRC will check document weekly, make changes as needed and revise RASP accordingly. (DIRECTED: The DRC shall begin the weekly review of the list of residents who require 2-person assistance within 72 hours of receipt of the plan of correction. During the weekly reviews, the DRC shall also ensure resident assessments and support plans are updated as resident care needs change. [REDACTED] 12/19/22). DCS training will be completed as needed, new employee's will be trained during their orientation week. Administrator will continue to complete daily rounds to ensure safety protocols for staff and residents are being completed. Review 2 person assistance document weekly to clarify DRC has reviewed and updated accordingly. Administrator will review all training and required paperwork monthly. Documentation of employee training will kept on file.

Directed Completion Date: 12/22/2022

Implemented [REDACTED] - 12/23/2022)