

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

March 27, 2023

[REDACTED]  
MONARCH MEADOW LLC  
490 COOLSPRING STREET  
UNIONTOWN, PA, 15401

RE: MONARCH MEADOW  
490 COOLSPRING STREET  
UNIONTOWN, PA, 15401  
LICENSE/COC#: 44944

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 02/06/2023, 02/15/2023, 02/17/2023, 02/27/2023 of the above facility, no regulatory citations have been identified as a result of this inspection.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,  
[REDACTED]

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

## Facility Information

Name: *MONARCH MEADOW* License #: *44944* License Expiration: *09/15/2023*  
 Address: *490 COOLSPRING STREET, UNIONTOWN, PA 15401*  
 County: *FAYETTE* Region: *WESTERN*

## Administrator

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

## Legal Entity

Name: *MONARCH MEADOW LLC*  
 Address: *490 COOLSPRING STREET, UNIONTOWN, PA, 15401*  
 Phone: [REDACTED] Email: [REDACTED]

## Certificate(s) of Occupancy

Type: *C-2 LP* Date: *11/20/1997* Issued By: *Labor & Industry*  
 Type: *Other* Date: *11/30/2020* Issued By: *North Union Twp.*

## Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *45* Waking Staff: *34*

## Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Complaint* Exit Conference Date: *03/27/2023*

## Inspection Dates and Department Representative

*02/06/2023 - On-Site:* [REDACTED]  
*02/15/2023 - Off-Site:* [REDACTED]  
*02/17/2023 - Off-Site:* [REDACTED]  
*02/27/2023 - Off-Site:* [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

License Capacity: *49* Residents Served: *32*

## Secured Dementia Care Unit

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

## Hospice

Current Residents: *12*

## Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *32*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *13* Have Physical Disability: *1*

## Inspections / Reviews

*02/06/2023 - Partial*

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

NO DEFICIENCIES FOUND