

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

March 29, 2023

[REDACTED]
MAGNOLIA PLACE MANAGEMENT LLC
[REDACTED]

RE: MAGNOLIA PLACE OF SAXONBURG
100 BELLA COURT
SAXONBURG, PA, 16056
LICENSE/COC#: 45090

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 03/28/2023 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: *MAGNOLIA PLACE OF SAXONBURG* License #: *45090* License Expiration: *02/20/2024*
 Address: *100 BELLA COURT, SAXONBURG, PA 16056*
 County: *BUTLER* Region: *WESTERN*

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

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

Certificate(s) of Occupancy

Type: <i>C 2 LP</i>	Date: <i>08/29/1994</i>	Issued By: <i>Dept L & I</i>
Type: <i>C 2 LP</i>	Date: <i>11/19/1997</i>	Issued By: <i>Dept L & I</i>
Type: <i>I 1</i>	Date: <i>02/14/2023</i>	Issued By: <i>Saxonburg Borough</i>

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *77* Waking Staff: *58*

Inspection Information

Type: *Partial* Notice: *Announced* BHA Docket #:
 Reason: *New* Exit Conference Date: *03/28/2023*

Inspection Dates and Department Representative

03/28/2023 On Site [Redacted]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *84* Residents Served: *52*

Secured Dementia Care Unit
 In Home: *Yes* Area: *Magnolia Village* Capacity: *32* Residents Served: *22*

Hospice
 Current Residents: *8*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *52*
 Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *2*
 Have Mobility Need: *25* Have Physical Disability: *3*

Inspections / Reviews

03/28/2023 - Partial
 Lead Inspector: [Redacted] Follow-Up Type: *Not Required*

NO DEFICIENCIES FOUND