

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

April 11, 2024

[REDACTED]
ABODE CARE OF MONROEVILLE LLC
[REDACTED]

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

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/22/2024 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: *08/13/2024*
 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: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: Total Daily Staff: *50* Waking Staff: *38*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint* Exit Conference Date: *02/22/2024*

Inspection Dates and Department Representative

02/22/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *66* Residents Served: *33*

Secured Dementia Care Unit

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

Hospice

Current Residents: *4*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *33*
 Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *1*
 Have Mobility Need: *17* Have Physical Disability: *1*

Inspections / Reviews

02/22/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/13/2024*

03/13/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: *04/10/2024*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/19/2024*

Inspections / Reviews *(continued)*

03/20/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/10/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 04/10/2024

04/11/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/10/2024

Reviewer: [REDACTED]

Follow-Up Type: Not Required

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

Before lunch on or around [REDACTED], staff person A responded to resident [REDACTED] call bell pendant. Resident [REDACTED] was sitting in [REDACTED] wheelchair in the hallway, outside of [REDACTED] bedroom. Staff person A approached resident [REDACTED] and attempted to turn resident [REDACTED] call bell pendant off. Resident [REDACTED] refused to let staff person A turn off [REDACTED] call bell pendant and told staff person A [REDACTED] was waiting for another staff person to respond, which lead to a verbal argument between staff person A and resident [REDACTED]. Staff person A then tried to pull resident [REDACTED] call bell pendant off from around resident [REDACTED] neck, causing the call bell cord to break. Resident [REDACTED] indicated the incident caused resident [REDACTED] to become upset and cry, and that resident [REDACTED] felt bullied by staff person A.

Plan of Correction

Directed [REDACTED] - 03/20/2024)

1. Staff person A has been placed on supervision since [REDACTED].

2. Staff person A will continue to be on supervision for 3 months. Staff person A will be supervised by another co-worker on shift, a back up supervisor will be assigned should the first one be unavailable. Each day supervisor will sign off on created form when shift is complete. Staff schedule will indicate who is the supervisor and back up each day. DON will ensure schedule is completed with a supervisor noted. Administrator will check the schedule daily and weekly for verification. Administrator, DON and ADON will continue to do hourly walk-thrus of the facility to verify staff person A is being supervised while performing direct care duties. All staff meeting was held on [REDACTED] to re-educate staff members on resident rights and de-escalation techniques and scenarios. (DIRECTED: Documentation of education shall be kept in accordance with 2600.65i. [REDACTED] 3/20/24). Resident meeting was held on [REDACTED] re-educating residents on their rights and the importance of speaking with the administrator or supervisor immediately if they feel their rights have been violated. A meeting was held with staff person A on [REDACTED] explaining the rules of supervision and [REDACTED] regarding the extension of supervision. A meeting was held with resident [REDACTED] on [REDACTED] to express concerns and what they would like to happen going forward. Resident [REDACTED] expressed both to Administrator and Administrator followed those suggestions. Weekly meetings will continue to be done with Resident [REDACTED]. Staff meetings will continue to be completed monthly or as needed. Resident council meetings will continue to be completed monthly. Resident and Staff interviews will continue to be completed by Administrator weekly or as needed interviews began December 2023. Interviews are still in place every Tuesday and Wednesday of each week. At least 2 DCS members from each shift and [REDACTED] residents per week are interviewed. All documentation will be placed in administrator office for review.

3. Administrator, DON and ADON will complete hourly rounds of the facility to ensure compliance starting [REDACTED]. Administrator and DON will check schedule daily to verify supervision is noted for staff person A. Administrator and DON will check completed form daily for signatures. Administrator, DON or outside agencies will continue to complete staff meetings and trainings monthly or as needed. Administrator will complete resident and staff interviews weekly. Administrator or Activities director will complete resident council monthly next meeting is scheduled for [REDACTED]. Administrator will speak to ombudsman monthly during routine visits. All completed documentation will be on file in administrator office.

42b - Abuse (continued)

DIRECTED: By 4/10/24: The administrator shall conduct a quality management review, which includes all items specified in 2600.26a. Documentation of the quality management review shall be kept, which includes the date/time of the meeting, the names of the staff persons in attendance and a summary of the items discussed. ■ 3/20/24

Proposed Overall Completion Date: 03/13/2024

Proposed Overall Completion Date: 03/19/2024

Directed Completion Date: 04/10/2024

Implemented ■ - 04/11/2024)