

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

February 19, 2025

[REDACTED], SECRETARY/TREASURER
INDIANA AL, LLC
[REDACTED]
[REDACTED]

RE: THE ADDISON OF MOOREHEAD
PLACE
116 MADISON CIRCLE
INDIANA, PA, 15701
LICENSE/COC#: 45509

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/03/2024 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: *THE ADDISON OF MOOREHEAD PLACE* License #: *45509* License Expiration: *05/06/2025*
 Address: *116 MADISON CIRCLE, INDIANA, PA 15701*
 County: *INDIANA* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *INDIANA AL, LLC*
 Address: [Redacted]
 Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *10/16/1997* Issued By: *L&I*

Staffing Hours

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

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Interim* Exit Conference Date: *10/03/2024*

Inspection Dates and Department Representative

10/03/2024 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *47* Residents Served: *35*

Secured Dementia Care Unit
 In Home: *No* Area: Capacity: Residents Served:

Hospice
 Current Residents: *3*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *35*
 Diagnosed with Mental Illness: *6* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *5* Have Physical Disability: *0*

Inspections / Reviews

10/03/2024 - Full
 Lead Inspector: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *11/03/2024*

11/08/2024 - POC Submission
 Submitted By: [Redacted] Date Submitted: *02/18/2025*
 Reviewer: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *11/15/2024*

Inspections / Reviews *(continued)*

11/13/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: 02/18/2025

Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 11/30/2024

02/19/2025 - Document Submission

Submitted By: [REDACTED] Date Submitted: 02/18/2025

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

85e - Trash Outside Home

1. Requirements

2600.

85.e. Trash outside the home shall be kept in covered receptacles that prevent the penetration of insects and rodents.

Description of Violation

There is a mattress and bedframe on the ground next to the dumpster; however, the garbage had been collected twice during the week.

Plan of Correction

Accept (█ - 11/13/2024)

- Executive Director had █ Sanitation remove mattress and bedframe on 10/9/24.
- The Plant Operations Director will complete weekly rounds for 4 weeks to verify that receptacles are free of debris. Results of the rounds will be reported to the Executive Director or Designee. Completed by 11/30/2024
- Current staff will receive training by the Executive Director or Designee on regulation 2600 85e on not storing debris next to the Trash receptacle. Training completed by 11/30/2024

Licensee's Proposed Overall Completion Date: 11/30/2024

Implemented (█ - 02/19/2025)

185a - Implement Storage Procedures

2. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident #1 is prescribed D-Mannose 500mg, take 1 capsule by mouth as needed; however, this medication is not available in the home.

Plan of Correction

Accept (█ - 11/08/2024)

- Resident #1 (D-Mannose 500mg) has been discontinued by Provider for non-use on 10/3/24.
- The Health and Wellness Director will complete a MAR to Cart Audit to verify that all prescribed medications are available in the medication cart. Results of the audit will be reviewed by the Executive Director or Designee . Completion by 11/1/2024
- The Health and Wellness Director will provide training with current Med tech's on the company's medication ordering & reordering guidelines including reporting to a supervisor if a reordered medication has not been received. Completion date by 11/20/2024
- Medication reordering and medication availability will be discussed by the Executive Director or Designee at the quarterly Quality Assurance Review with current Directors in attendance. Completion date by 11/30/2024

Licensee's Proposed Overall Completion Date: 11/30/2024

Implemented (█ - 02/19/2025)