

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

April 21, 2025

[REDACTED]  
FAIR OAKS OPCO LLC  
[REDACTED]

RE: FAIR OAKS SENIOR LIVING  
2200 WEST LIBERTY AVENUE  
PITTSBURGH, PA, 15226  
LICENSE/COC#: 45286

[REDACTED],  
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/24/2025 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: FAIR OAKS SENIOR LIVING License #: 45286 License Expiration: 09/05/2025  
 Address: 2200 WEST LIBERTY AVENUE, PITTSBURGH, PA 15226  
 County: ALLEGHENY Region: WESTERN

**Administrator**

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

**Legal Entity**

Name: FAIR OAKS OPCO LLC  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

**Staffing Hours**

Resident Support Staff: Total Daily Staff: 126 Waking Staff: 95

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #:  
 Reason: Complaint, Monitoring Exit Conference Date: 03/24/2025

**Inspection Dates and Department Representative**

03/24/2025 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 100 Residents Served: 75

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

Hospice  
 Current Residents: 11

Number of Residents Who:  
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 72  
 Diagnosed with Mental Illness: 2 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 51 Have Physical Disability: 2

**Inspections / Reviews**

03/24/2025 Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 04/06/2025

04/07/2025 - POC Submission

Submitted By: [REDACTED] Date Submitted: 04/19/2025  
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 04/11/2025

Inspections / Reviews *(continued)*

04/15/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/19/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 04/18/2025

04/21/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/19/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

## 183b Meds and Syringes Locked

**1. Requirements**

2600.

183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

**Description of Violation**

At 1:05pm, numerous medications for resident [REDACTED] were unlocked and accessible in a medication cup next to resident [REDACTED] in the downstairs lounge. Direct care staff person A indicated [REDACTED] previously gave resident [REDACTED] the cup of medications during lunch; however, did not observe resident [REDACTED] actually take the medications. According to resident [REDACTED] assessment, dated [REDACTED], resident [REDACTED] is unable to self-administer medications.

**Plan of Correction****Accept [REDACTED] - 04/15/2025)**

Immediately Staff Person A was retrained by the Administrator and Director of Resident Care on the proper technique to administer medications to a resident on 3/24/2025. Documentation will be kept.

A training for all Med Techs and Direct Care Staff will be held on 4/10/2025 by the administrator, Director of Resident Care, and Compliance Director to ensure that everyone understands the proper procedure for assisting a resident with medication administration, and on regulation 2600.183B to ensure prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. Documentation will be kept.

Staff Person A, and all other med techs will be supervised at a medication pass by the Director of Resident Care, weekly for one month, and monthly thereafter. Documentation will be kept. The Director of Resident Care and Administrator conducted a quality management review on 3/27/2025 of all items specified in 2600.183b. Documentation of the quality review will be kept.

Resident [REDACTED] was provided [REDACTED] medications in a med cup in the Dining Room, where staff member [REDACTED] left them with [REDACTED]. The resident placed them in [REDACTED] pocket, when we were made aware resident [REDACTED] had the medications on [REDACTED] person, it was still within the timeframe that the medications could be taken and Staff Member [REDACTED] witnessed [REDACTED] take them.

The weekly medication administration observations began the week of 4/6/2025. Documentation will be kept.

Licensee's Proposed Overall Completion Date: 04/18/2025

**Implemented [REDACTED] 04/21/2025)**