

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

December 5, 2025

[REDACTED]  
MERCY LIFE CENTER CORPORATION

[REDACTED]  
ATTN: LICENSING/COMPLIANCE  
[REDACTED]

RE: GARDEN VIEW MANOR  
441 SWISSVALE AVENUE  
PITTSBURGH, PA, 15221  
LICENSE/COC#: 44069

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/18/2025, 11/19/2025 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: GARDEN VIEW MANOR License #: 44069 License Expiration: 05/27/2026  
 Address: 441 SWISSVALE AVENUE, PITTSBURGH, PA 15221  
 County: ALLEGHENY Region: WESTERN

**Administrator**

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

**Legal Entity**

Name: MERCY LIFE CENTER CORPORATION  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 52 Waking Staff: 39

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #:  
 Reason: Incident Exit Conference Date: 11/19/2025

**Inspection Dates and Department Representative**

11/18/2025 On Site: [REDACTED]  
 11/19/2025 On Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 56 Residents Served: 49  
 Secured Dementia Care Unit  
 In Home: No Area: Capacity: Residents Served:  
 Hospice  
 Current Residents: 0  
 Number of Residents Who:  
 Receive Supplemental Security Income: 49 Are 60 Years of Age or Older: 25  
 Diagnosed with Mental Illness: 49 Diagnosed with Intellectual Disability: 1  
 Have Mobility Need: 3 Have Physical Disability: 0

**Inspections / Reviews**

11/18/2025 - Partial  
 Lead Inspector: [REDACTED] Follow Up Type: POC Submission Follow Up Date: 12/04/2025

Inspections / Reviews *(continued)*

12/03/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/04/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 12/06/2025

12/05/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/04/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

16c - Written Incident Report

1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department’s personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On [redacted] at approximately 2:30am, local police were dispatched to the home to conduct a welfare check on resident [redacted] however, this incident was not reported to the Department until [redacted].

On [redacted] it was discovered that resident [redacted] was gone from the personal care home for over 24 hours on an unexplained absence; however, this incident was not reported to the Department until [redacted].

REPEAT VIOLATION: [redacted], et. al.

Plan of Correction

Accept [redacted] - 12/03/2025)

Plan of Correction: 16c - Written Incident Report

- On 11/19/2025 both incident reports were completed and sent to DHS.
- On 11/25/2025 and 11/26/2025 Garden View Manor’s CMHPCH Supervisor(s) facilitated incident reporting refresher trainings to Garden View Manor CMHPCH staff which included how to identify reportable incidents for missing persons, police on site, and abuse reporting in accordance with Regulation 2600.15 and a review of all reportable incidents and how to complete incident reports in accordance with regulation 2600.16c.
- Garden View Manor’s CMHPCH PCHA and/or Supervisors will continue this training until all Garden View Manor’s CMHPCH staff have completed to prevent future violations of regulation standard 2600.16c - Written Incident Report. This training will be completed with all Garden View Manor CMHPCH staff by 12/6/2025.
- Documentation of education is kept in accordance with Regulation 2600.65(j) and maintained in the staff meeting/training binder in the ground floor supervisor’s office.
- Starting 12/6/2025, after staff refresher training has occurred, if the incident reporting process continues to be delayed, Garden View Manor’s CMHPCH PCHA and/or Supervisors will provide feedback to their senior manager during their supervision meetings. In cases of repeated non-compliance, Human Resources will be consulted to determine appropriate corrective action.
- Starting 12/1/2025, Garden View Manor CMHPCH leaders (Supervisors, PCHA, Team Lead &/or staff designee) will monitor and review incidents, reporting, and notifications for reportable incidents and abuse daily during shift change staff meetings to ensure timely and appropriate abuse reporting in accordance with Regulation 2600.15 and incident reporting in accordance with regulation 2600.16c.

Licensee's Proposed Overall Completion Date: 12/06/2025

Implemented [redacted] - 12/05/2025)

254a - Records Discharge/Active

2. Requirements

2600.

254.a. Records of active and discharged residents shall be maintained in a confidential manner, which prevents unauthorized access.

## 254a - Records Discharge/Active (continued)

**Description of Violation**

On [REDACTED] at 2:37pm, numerous resident records were unlocked, unattended and accessible in the basement medical record room, to include the following:

- Approximately 31 boxes of resident records to include residents [REDACTED] and [REDACTED] records
- A box containing numerous medication administration records (MAR's) from 2021 and 2022
- A box containing 6 resident record binders, including resident [REDACTED] binder

**Plan of Correction**

Accept [REDACTED] - 12/03/2025)

*Plan of Correction: 254a - Records Discharge/Active*

- On 11/18/2025 during the inspection the housekeeping supervisor was informed, and Garden View Manor's CMHPCH PCHA/Supervisor closed and locked all basement doors.
- Starting 11/19/2025, the housekeeping supervisor is checking the basement doors at least two times each day to ensure they are closed securely.
- On 11/19/2025 Garden View Manor CMHPCH Supervisors updated the housekeeping weekly checklist to include ongoing monitoring of all basement doors to ensure doors remain securely closed. Housekeeping staff will complete the weekly housekeeping checklist, and the housekeeping supervisor will submit the completed weekly housekeeping checklist to the PCHA/Supervisors each week.
- Starting 12/1/2025, Garden View Manor CMHPCH PCHA or Supervisors will monitor and review updated housekeeping checklist every week to prevent future occurrences and to ensure ongoing compliance with Regulation 2600. 254a - Records Discharge/Active.
- Completed housekeeping checklist forms will be maintained in the "Housekeeping" binder in the ground floor supervisor's office.
- By 12/5/2025 Garden View Manor CMHPCH PCHA and Supervisor(s) will facilitate a refresher training on security best practices and confidentiality protocols in accordance with Regulation 2600. 254a - Records Discharge/Active for all Garden View Manor's CMHPCH staff and the Housekeeping Supervisor.
- Documentation of education is kept in accordance with Regulation 2600.65(j) and maintained in the staff meeting/training binder in the ground floor supervisor's office.

**Licensee's Proposed Overall Completion Date:** 12/05/2025

Implemented ([REDACTED] 12/05/2025)