

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

December 11, 2025

[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 licensing inspections on 11/18/2025 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:** ABODE CARE OF MONROEVILLE      **License #:** 45119      **License Expiration:** 11/14/2025  
**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**

**Type:** I-2      **Date:** 06/04/2012      **Issued By:** Municipality of Monroeville

**Staffing Hours**

**Resident Support Staff:** 0      **Total Daily Staff:** 50      **Waking Staff:** 38

**Inspection Information**

**Type:** Partial      **Notice:** Unannounced      **BHA Docket #:**  
**Reason:** Complaint, Provisional      **Exit Conference Date:** 11/18/2025

**Inspection Dates and Department Representative**

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

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 66      **Residents Served:** 36

**Secured Dementia Care Unit**

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

**Hospice**

**Current Residents:** 6

**Number of Residents Who:**

**Receive Supplemental Security Income:** 0      **Are 60 Years of Age or Older:** 35  
**Diagnosed with Mental Illness:** 5      **Diagnosed with Intellectual Disability:** 1  
**Have Mobility Need:** 14      **Have Physical Disability:** 1

**Inspections / Reviews**

11/18/2025 Partial

**Lead Inspector:** [REDACTED]      **Follow-Up Type:** Not Required

**NO DEFICIENCIES FOUND**