

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

February 10, 2026

[REDACTED]
FAVERS RESIDENTIAL CARE HOME INC
[REDACTED]

RE: FAVERS RESIDENTIAL CARE HOME
574 TEECE AVENUE
PITTSBURGH, PA, 15202
LICENSE/COC#: 44913

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/29/2025 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: *FAVERS RESIDENTIAL CARE HOME* License #: *44913* License Expiration: *11/05/2026*
 Address: *574 TEECE AVENUE, PITTSBURGH, PA 15202*
 County: *ALLEGHENY* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *FAVERS RESIDENTIAL CARE HOME INC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: Total Daily Staff: *11* Waking Staff: *8*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Monitoring* Exit Conference Date: *12/29/2025*

Inspection Dates and Department Representative

12/29/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *14* Residents Served: *11*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *11* Are 60 Years of Age or Older: *11*
 Diagnosed with Mental Illness: *11* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

12/29/2025 Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *01/24/2026*

01/28/2026 - POC Submission

Submitted By: [REDACTED] Date Submitted: *02/09/2026*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *02/03/2026*

Inspections / Reviews *(continued)*

02/04/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/09/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 02/10/2026

02/10/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/09/2026

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 approximately 9:00am, the following medications for resident [REDACTED] were unlocked, unattended and accessible in the home's front office:

- [REDACTED]
- [REDACTED]
- [REDACTED]

REPEAT VIOLATION: [REDACTED]

Plan of Correction

Directed [REDACTED] - 02/04/2026)

12/29/2025 creams belonging to resident [REDACTED] was placed in locked medication cart on day of inspection 12/29/2025 Administrator educated all staff that resident [REDACTED] or any resident here after has creams that they apply their self, staff must stay in office or visible for resident to return it directly to staff. And staff can put away immediately in lock medication cart 12/30/2025 (DIRECTED: Documentation of the staff education shall be kept in accordance with 2600.65i. [REDACTED] 2/4/26)

Administrator had a talk and educated resident [REDACTED] explaining to resident [REDACTED] And also to residents that have cream in their rooms that they can apply self. They are to hand creams directly to staff, not sit creams down anywhere, creams are to be handed directly to staff after use.

Documentation and signed by staff, administrator, and resident [REDACTED]

Education information is added as an addendum for medication passing every six months next medication passing with medication trainer is February 2026.

To ensure long term compliance the administrator or the designated daylight med tech shall inspect the entire home daily for 1 month then weekly thereafter to ensure all prescriptions medications, OTC medications CAM and syringes are kept in an area or container that is locked. Education of med techs on the daily inspection will take place 2/2/26.

Daily Inspections of the entire home will begin 2/2/26.

Weekly inspections will begin 3/1/26. The form used to document inspections is attached to this plan.

Documentation will be kept in the homes files/POC binder

Proposed Overall Completion Date: 02/02/2026

Directed Completion Date: 02/04/2026

Implemented ([REDACTED] - 02/10/2026)

225c - Additional Assessment

2. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

1. Annually.

Description of Violation

Resident [REDACTED] most recent assessment, dated [REDACTED] does not include an assessment of resident [REDACTED] supervision

225c Additional Assessment (continued)

needs. This section of resident [REDACTED] assessment is blank.

Resident [REDACTED] most recent assessment, dated [REDACTED] does not include the diagnoses of Gastroesophageal Reflux Disease (GERD) and constipation as indicated on resident # [REDACTED] most recent medical evaluation, dated [REDACTED].

Plan of Correction

Accept [REDACTED] - 01/28/2026)

Immediate action: The assessment of resident [REDACTED] was reviewed in the supervision needs were completed 12/30/2025 assessor and resident signed updated Rasp on 12/30/2026. AND Resident [REDACTED] diagnosis was written in on assessment 01/20/2026 The assessor and the resident signed the updated assessments on 01/20/2026.

Continue compliance on 01/20/2026 all residents assessments were audited by the administrator assistant for completeness beginning 01/31/2026 assessment and support plans will be double checked by two people, quarterly administrator and administrator assistant or designated person. Both persons will sign the check off form and both persons re read the education that was done. Assessments and support plans will be completely looked over again by 01/31/2026

Licensee's Proposed Overall Completion Date: 01/31/2026

Implemented [REDACTED] - 02/10/2026)

251c - Standardized Forms**3. Requirements**

2600.

251.c. The home shall use standardized forms to record information in the resident's record.

Description of Violation

Resident [REDACTED] most recent medical evaluation, dated [REDACTED], is not completed on the Department's current standardized form.

Plan of Correction

Directed [REDACTED] - 02/04/2026)

Immediate action: The medical evaluation of resident [REDACTED] Will be redone on the correct form 2600 form 01/28/2026 and will be reviewed and signed by the physician on resident next visit 02/10/2026. The administrator shall ensure resident new medical evaluation is kept in resident records.

Continue compliance: administrators assistant has already went into tabular pro and changed the incorrect form to the new forms in September 2025, So that this does not happen in the future. This form was changed in 2025 September to the new form. But this resident new medical evaluation was done by an outside doctor. Who use the wrong form. Favere residential care home Will give residents that see an outside doctor the New correct form to fill out. To ensure that they have the correct form.

All resident records will be reviewed by the administrator or designee to ensure any DME completed after 7/1/25 has been completed on the correct department designated form.

Review was completed on 1/28/26 by the administrator assistant. Review is attached. Res [REDACTED] was the only DME completed on the incorrect form. Review is attached and will be kept in the homes records.

All future DME's will be reviewed by the Administrator or Administrators assistant within 48 hours of completion for the remainder der of 2026.

Proposed Overall Completion Date: 01/30/2026

Directed Completion Date: 02/10/2026

251c Standardized Forms (*continued*)

Implemented [REDACTED] - 02/10/2026)