

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

March 6, 2026

[REDACTED]
MELODY MANOR PCH LLC
[REDACTED]

RE: MELODY MANOR
413 NORTH MCKEAN STREET
KITTANNING, PA, 16201
LICENSE/COC#: 44676

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/05/2026, 01/09/2026 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: MELODY MANOR License #: 44676 License Expiration: 07/21/2026
 Address: 413 NORTH MCKEAN STREET, KITTANNING, PA 16201
 County: ARMSTRONG Region: WESTERN

Administrator

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

Legal Entity

Name: MELODY MANOR PCH LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 09/28/1987 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 38 Waking Staff: 29

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint Exit Conference Date: 01/13/2026

Inspection Dates and Department Representative

01/05/2026 - On-Site: [REDACTED]
 01/09/2026 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 43 Residents Served: 38
 Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:
 Hospice
 Current Residents: 2
 Number of Residents Who:
 Receive Supplemental Security Income: 25 Are 60 Years of Age or Older: 33
 Diagnosed with Mental Illness: 14 Diagnosed with Intellectual Disability: 5
 Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

01/05/2026 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/15/2026

02/27/2026 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 03/03/2026
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 03/03/2026

Inspections / Reviews *(continued)*

03/06/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/03/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

15a - Resident Abuse Report

1. Requirements

2600.

15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

On [redacted], resident [redacted] informed the home that approximately one week ago, staff person A disrespected [redacted] when told by staff person A in a rough and disrespectful manner, that resident [redacted] could piss themselves and not pee in a cup or the garbage can in their bedroom. However, this allegation of abuse was not reported to the local Area Agency on Aging until [redacted].

Sometime during [redacted], multiple residents informed the home that staff person B would yell and scream and call residents' names, to include resident [redacted], who indicated when asking staff person [redacted] questions, staff would yell and scream and call resident [redacted] a [redacted]. However, this allegation of abuse was not reported to the local Area Agency on Aging until [redacted].

Plan of Correction

Accept [redacted] - 02/27/2026)

On 1/5/2026, Administrator reported potential verbal abuse on Resident [redacted] By Staff A to Area Agency on Aging. A Training is being held for all Staff including Administration by Area Agency on Aging on 2/18/2026 on Requirement 2600 15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons. Beginning 2-18-2026, Administrator or Designee will monitor all incident reports daily with documentation and reporting of any that are required.

Licensee's Proposed Overall Completion Date: 02/18/2026

Implemented [redacted] - 03/06/2026)

16c - Written Incident Report

2. 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

Sometime during [redacted], multiple residents informed the home that staff person B would yell and scream and call residents' names, to include resident [redacted], who indicated when asking staff person [redacted] questions, staff would yell and scream and call resident [redacted] a "[redacted]".

The home did not report this incident to the department until [redacted].

16c - Written Incident Report (continued)

Plan of Correction

Accept [redacted] - 02/27/2026)

On 1/5/2026, Administrator reported potential verbal abuse on Resident [redacted] By Staff B to Area Agency on Aging. Training is being held by Area Agency on Aging on 2-18-2026 for all Staff and Office Staff on Requirement 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). Since neither Staff or Residents informed Administration of this, a survey for Residents to share any problems or concerns was created by Executive Director & will be implemented beginning 2-18-2026 after Staff meeting. The survey will be repeated monthly for 6 months beginning 2-18-2026. Documentation of Resident responses will be kept at Facility.

Licensee's Proposed Overall Completion Date: 02/18/2026

Implemented [redacted] - 03/06/2026)

42f - Mail Access

3. Requirements

2600.

42.f. A resident has the right to receive and send mail.

- 2. Incoming mail may not be opened or read by staff persons unless upon the request of the resident or the resident's designated person.

Description of Violation

On [redacted] staff person [redacted] opened mail belonging to resident [redacted] The staff person did not have the resident's permission to do so.

Plan of Correction

Accept [redacted] - 02/27/2026)

After speaking with State surveyor on day of inspection, Staff #3 immediately stopped opening all residents mail to include Resident [redacted] On 1-9-2026 Executive Director reviewed with Administration regulation 2600.42.f "A resident has the right to receive and send mail. Incoming mail may not be opened or read by staff persons unless upon the request of the resident or the resident's designated person." Administrator will review this regulation with all other Staff on 2-18-2026. Day after inspection, 1-9-2026, Assistant Director issued a letter to residents asking how they wanted their mail handled. A form created by Assistant Director was created to ask Residents if Administration can open mail and distribute to the proper people for them. If signed. Administration will only open what is believed to be bills that need submitted to Rep payee's. If the Resident signs stating Do Not Open, ALL mail will be given to Resident, with anyone signing agreement receiving all personal mail. Beginning 2-18-2026, All future contracts will have this form in the packet.

Licensee's Proposed Overall Completion Date: 02/18/2026

Implemented [redacted] 03/06/2026)

227a - Support Plan 30 Days

5. Requirements

227a - Support Plan 30 Days (continued)

2600.

227.a. A resident requiring personal care services shall have a written support plan developed and implemented within 30 days of admission to the home. The support plan shall be documented on the Department's support plan form.

Description of Violation

Resident [redacted] was admitted on [redacted] however, the resident's initial support plan did not address the resident's use of a walker and behavior of urinating in cups and garbage cans in [redacted] bedroom and how the home will meet these needs.

Plan of Correction

Accept [redacted] - 02/27/2026)

Assistant Director updated Support plan for Resident [redacted] on 1/6/2025, with use of walker on the front page of the rasp and confirmed Bladder issue on page 3. On 1-9-2026, Executive Director reviewed with Assistant Director and Administrator regulation 227.a. A resident requiring personal care services shall have a written support plan developed and implemented within 30 days of admission to the home. The support plan shall be documented on the Department's support plan form. All other Support plans are being audited by Regional Assistant and Administrator. Review will be finished by 2-28-2026 with documentation kept. All new Admissions will be reviewed by Administrator or Designee for correct information before filing.

Licensee's Proposed Overall Completion Date: 02/28/2026

Implemented [redacted] - 03/06/2026)

227d - Support Plan Medical/Dental

6. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

The assessment for resident [redacted] dated [redacted], indicates the resident has a need for Toileting. The resident's support plan, dated [redacted], does not document how this need will be met.

Plan of Correction

Accept [redacted] - 02/27/2026)

On 1-6-2026, Assistant Director added comments on Resident [redacted] RASP about Toileting needs, On 1-9-2026 Executive Director reviewed Regulation 2600.227.d. with Assistant Director and Administrator which reads Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services. All future admissions will have paper work audited by Administration to be sure regulation 227d is being followed.

227d - Support Plan Medical/Dental (*continued*)

Licensee's Proposed Overall Completion Date: 02/18/2026

Implemented [REDACTED] - 03/06/2026)