

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

January 12, 2026

[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 01/07/2026 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:** 06/19/2026  
**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:** 62 **Waking Staff:** 47

**Inspection Information**

**Type:** Partial **Notice:** Unannounced **BHA Docket #:**  
**Reason:** Complaint, Incident, Fine **Exit Conference Date:** 01/07/2026

**Inspection Dates and Department Representative**

01/07/2026 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information			
<b>License Capacity:</b> 66	<b>Residents Served:</b> 37		
Secured Dementia Care Unit			
<b>In Home:</b> No	<b>Area:</b>	<b>Capacity:</b>	<b>Residents Served:</b>
Hospice			
<b>Current Residents:</b> 6			
Number of Residents Who:			
<b>Receive Supplemental Security Income:</b> 0	<b>Are 60 Years of Age or Older:</b> 36		
<b>Diagnosed with Mental Illness:</b> 5	<b>Diagnosed with Intellectual Disability:</b> 0		
<b>Have Mobility Need:</b> 25	<b>Have Physical Disability:</b> 1		

**Inspections / Reviews**

01/07/2026 Partial  
**Lead Inspector:** [REDACTED] **Follow-Up Type:** Not Required

**NO DEFICIENCIES FOUND**