

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

June 10, 2026

[REDACTED]
ASBURY HEALTHCARE, LLC
[REDACTED]
[REDACTED]

RE: ASBURY HEALTH CENTER
700 BOWER HILL ROAD
PITTSBURGH, PA, 15243
LICENSE/COC#: 45550

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/07/2026 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: ASBURY HEALTH CENTER **License #:** 45550 **License Expiration:** 04/01/2027
Address: 700 BOWER HILL ROAD, PITTSBURGH, PA 15243
County: ALLEGHENY **Region:** WESTERN

Administrator

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

Legal Entity

Name: ASBURY HEALTHCARE, LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 75 **Waking Staff:** 56

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint, Incident, Monitoring **Exit Conference Date:** 05/07/2026

Inspection Dates and Department Representative

05/07/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 120 **Residents Served:** 44

Secured Dementia Care Unit

In Home: Yes **Area:** 6th floor **Capacity:** 24 **Residents Served:** 23

Hospice

Current Residents: 5

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 1
Diagnosed with Mental Illness: 15 **Diagnosed with Intellectual Disability:** 1
Have Mobility Need: 31 **Have Physical Disability:** 0

Inspections / Reviews

05/07/2026 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 05/27/2026

05/27/2026 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 06/09/2026
Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 06/02/2026

Inspections / Reviews *(continued)*

06/04/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/09/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 06/09/2026

06/10/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/09/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [redacted] at approximately 6:30am, resident [redacted] used their fist to punch resident [redacted] on resident [redacted]'s upper left arm, resulting in pain and a red mark on resident [redacted]'s upper left arm.

Repeated Violation [redacted]

Plan of Correction

Accept [redacted] - 06/04/2026)

Resident number [redacted] does have a prior history of becoming agitated quickly. However, since this incident on 2/27/26 Resident number [redacted] has had numerous changes to care plan and plan of care. Resident follows Pysch services that come into the facility monthly and as needed. Additionally, resident has had medication adjustments to help manage his short temper and dementia diagnosis. Facility is also working with POA to discuss potential other options which may include a new facility, if behavior continues

Additionally, staff were reeducated on March 9, 2026, on how to handle situations where residents become aggressive or put their hands on other residents. All education provided will be kept in the nurses office on the 6th floor.

Facility also completes 30-minute check ins with resident number 1 daily.

Beginning June 1, 2026 – Administrator/designee will interview 10 residents monthly to ensure they feel safe at facility and are free from abuse from staff and other residents. Interviews will be conducted privately.

Audit/interview findings will be reviewed by Administrator monthly (last week of every month) and will continue for 3 months, or until substantial compliance is achieved. All resident interviews will be kept in the nurse's office on the 6th floor.

Additionally, if other residents exhibit behaviors staff will immediately inform Administrator and or designee and MD will be contacted immediately to discuss next steps and or adding new interventions into daily routine.

Licensee's Proposed Overall Completion Date: 06/09/2026

Implemented [redacted] - 06/10/2026)