

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

June 13, 2023

[REDACTED], PRESIDENT/COO  
GRAINGER AID OPCO LLC  
10960 FRANKSTOWN ROAD  
PENN HILLS, PA, 15235

RE: ALLEGHENY PLACE  
10960 FRANKSTOWN ROAD  
PENN HILLS, PA, 15235  
LICENSE/COC#: 44489

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/02/2023 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:** ALLEGHENY PLACE **License #:** 44489 **License Expiration:** 04/14/2024  
**Address:** 10960 FRANKSTOWN ROAD, PENN HILLS, PA 15235  
**County:** ALLEGHENY **Region:** WESTERN

## Administrator

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

## Legal Entity

**Name:** GRAINGER AID OPCO LLC  
**Address:** 10960 FRANKSTOWN ROAD, PENN HILLS, PA, 15235  
**Phone:** [REDACTED] **Email:** [REDACTED]

## Certificate(s) of Occupancy

**Type:** C-2 LP **Date:** 02/02/1998 **Issued By:** Dept. of Labor and Industry

## Staffing Hours

**Resident Support Staff:** 0 **Total Daily Staff:** 34 **Waking Staff:** 26

## Inspection Information

**Type:** Partial **Notice:** Unannounced **BHA Docket #:**  
**Reason:** Complaint, Incident **Exit Conference Date:** 05/12/2023

## Inspection Dates and Department Representative

05/02/2023 - On-Site: [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

**License Capacity:** 47 **Residents Served:** 22

## Secured Dementia Care Unit

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

## Hospice

**Current Residents:** 5

## Number of Residents Who:

**Receive Supplemental Security Income:** 0 **Are 60 Years of Age or Older:** 22  
**Diagnosed with Mental Illness:** 1 **Diagnosed with Intellectual Disability:** 0  
**Have Mobility Need:** 12 **Have Physical Disability:** 0

## Inspections / Reviews

05/02/2023 Partial

**Lead Inspector:** [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 06/09/2023

06/08/2023 - POC Submission

**Submitted By:** [REDACTED] **Date Submitted:** 06/07/2023  
**Reviewer:** [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 06/12/2023

Inspections / Reviews *(continued)*

06/13/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/12/2023

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] an officer from the [REDACTED] Police Department notified the home of an active criminal investigation regarding former staff person A. The investigation involves access device fraud regarding a credit card belonging to resident #1. Former staff person A used approximately \$25,000.00 from resident's credit card for cash advances and paying off personal debts.

**Plan of Correction**

Accept [REDACTED] - 06/08/2023)

- \* On [REDACTED] former staff person A was terminated.
- \* On [REDACTED], former resident #1 physically moved out of the facility
- \* On [REDACTED] Adult Protective Services and DHS were notified.
- \* On 4/12/23, current residents were interviewed by the Executive Director (ED) to ensure there has been no misappropriation of resident property and residents felt they are not being neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way, and no other violations, of regulation 2600.42b. were identified.
- \* By 6/16/23, Regional Executive Director (RED) to re-educate current staff on misappropriation of resident property and the requirements set within the regulation 2600.42b. Documentation of education will be retained within the community. (Exhibit 01 - Inservice)
- \* Starting the week of 6/5/23, ED or designee will interview 2 residents/residents' responsible parties and 2 employees weekly x 4 weeks, bi-weekly x 4 weeks then monthly x 1 to ensure they there has been no misappropriation of resident property and residents are not being neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way and ensure continued compliance with regulation 2600.42b. (Exhibit 2 - Audit Tool)
- \* Starting in June 2023, RED or designee will discuss the results of the audit during the monthly Quality Improvement meetings. The QI committee will determine if continued auditing is necessary based on three consecutive months of compliance.
- \* Completion Date: 6/16/23

Licensee's Proposed Overall Completion Date: 08/11/2023

Implemented [REDACTED] - 06/13/2023)