

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

May 22, 2025

[REDACTED]
SNH PENN TENANT LLC

[REDACTED]
C/O INTEGRACARE CORP
[REDACTED]

RE: EXTON SENIOR LIVING
600 NORTH POTTSTOWN PIKE
EXTON, PA, 19341
LICENSE/COC#: 14510

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/14/2025 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: *EXTON SENIOR LIVING* License #: *14510* License Expiration: *01/01/2026*
 Address: *600 NORTH POTTSTOWN PIKE, EXTON, PA 19341*
 County: *CHESTER* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *SNH PENN TENANT LLC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *05/03/2000* Issued By: *PA L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *79* Waking Staff: *59*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint* Exit Conference Date: *04/14/2025*

Inspection Dates and Department Representative

04/14/2025 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *100* Residents Served: *59*

Secured Dementia Care Unit
 In Home: *Yes* Area: *Life Story* Capacity: *22* Residents Served: *18*

Hospice
 Current Residents: *5*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *58*
 Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *1*
 Have Mobility Need: *20* Have Physical Disability: *0*

Inspections / Reviews

04/14/2025 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/12/2025*

05/12/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *05/21/2025*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/17/2025*

Inspections / Reviews *(continued)*

05/19/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/21/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 05/21/2025

05/22/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/21/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

82c - Locking Poisonous Materials

1. Requirements

2600.

82.c. Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

Description of Violation

On [redacted] at 9:28 am, the lock on the cabinet door under the bathroom sink in room [redacted], where resident [redacted] resides, was broken. The cabinet contained several products with poisonous materials, including a shampoo bottle with a manufacturer's label warning, "For external use only and as directed. Discontinue if irritation occurs. Avoid contact with eyes," and toothpaste with a label warning, "If more than used for brushing is accidentally swallowed, get medical help or contact a Poison Control Center right away."

At 9:32 am, there was a bottle of air freshener on resident [redacted] bathroom sink in room [redacted] unlocked and unattended, with a manufacturer's label instructing, "Do not aim towards face. Do not swallow or get in eyes. If swallowed, call a poison control center or doctor immediately. Extremely flammable."

The residents of the Secure Care Dementia Unit (SDCU), including resident [redacted] and resident [redacted], are assessed as unsafe to safely use or avoid poisonous materials.

Plan of Correction

Accept [redacted] - 05/12/2025)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 04/14/2025 by the Maintenance Director to repair the broken lock and store/ remove the poisonous materials.

To enhance the currently compliant operations, on 05/07/2025 the Executive Operations Officer or designee will order 15 locking medicine boxes to be placed in the bathroom cabinets throughout occupied rooms in the secured dementia unit. All poisonous/hazardous materials will be stored in the locking boxes as well as the cabinet, with a completion date of 05/15/2025.

Effective 05/12/2025 the Memory Care Director will perform weekly audits through 06/13/2025 to maintain ongoing compliance to ensure keeping poisonous materials locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials. On or before 5/16/2025 Memory Care Director will do a in-service training on regulation 82c with the memory care staff including identification of poisonous materials, proper storage protocols and reporting procedures for broken locks or unsecured items. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 05/15/2025

Implemented [redacted] - 05/22/2025)

85a - Sanitary Conditions

2. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

85a Sanitary Conditions (continued)

Description of Violation

On [redacted] at 9:32 am, there was a powerful urine odor coming from room [redacted] which was clearly noticeable in the hallway and much of the Secure Dementia Care Unit.

Plan of Correction

Accept [redacted] 05/19/2025)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 04/14/2025 by the Housekeeping Director to clean and sanitize resident's apartment. Resident is on hospice with [redacted] creating a very [redacted].

To enhance the currently compliant operations, on 05/12/2025 the Housekeeping Director along with housekeeping staff aided by caregivers will check resident's room daily for sanitary conditions, immediately removing any soiled briefs, with a completion date of 06/13/2025.

Effective 05/12/2025 the Housekeeping Director or designee will perform daily audits through 06/13/2025 to maintain ongoing compliance of sanitary conditions daily. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 05/17/2025

Implemented [redacted] - 05/22/2025)

91 - Telephone Numbers

3. Requirements

2600.

- 91. Emergency Telephone Numbers - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

Description of Violation

On [redacted] at 10:04 am, there were no emergency telephone numbers, such as for the nearest hospital and fire department, on or by the telephone in room [redacted]

Plan of Correction

Accept [redacted] - 05/12/2025)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 04/14/2025 by the Maintenance Director to place an emergency phone list in resident's apartment.

To enhance the currently compliant operations, on 05/12/2025 The Maintenance Director will audit all apartments to make sure Emergency Telephone Numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each phone with an outside line, with a completion date of 05/16/2025.

91 Telephone Numbers (continued)

Effective 05/12/2025 the Maintenance Director or designee will perform monthly inspections through 07/31/2025 to maintain ongoing compliance and report findings monthly of each apartment to ensure posting telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline on or by each telephone with an outside line. A notification will be sent to all staff by 5/12/2025 reminding them to check rooms for posting. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 05/16/2025

Implemented [redacted] - 05/22/2025)

101j7 - Lighting/Operable Lamp

4. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

On [redacted] at 10:14 am, resident [redacted] bedside lamp was inoperable.

Plan of Correction

Accept [redacted] - 05/12/2025)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 04/14/2025 by the Maintenance Director to replace burned out bulb and an additional press light was installed at bedside.

To enhance the currently compliant operations, on 05/12/2025 the Maintenance Director or designee will inspect all bedside lamps for operation and report findings to EOO, with a completion date of 05/16/2025.

Effective 05/12/2025 the Maintenance Director will perform weekly inspections through 06/13/2025 to maintain ongoing compliance ensuring each resident has in their bedroom an operable lamp or other source of lighting that can be turned on at bedside. This will be reminded and tracked using TELS. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 05/16/2025

Implemented [redacted] - 05/22/2025)

162c - Menus Posted

5. Requirements

2600.

162.c. Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

Description of Violation

On [redacted] at 9:37 am, the home's menu for [redacted] to [redacted] was posted in the Secure Dementia Care Unit.

162c Menus Posted (continued)

Plan of Correction**Accept** (████) **05/19/2025)**

In response to the violation on █████ by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 04/14/2025 by the Memory Care Director to Immediately remove the outdated menu from the Secure Dementia Care Unit. The current and correct weekly menu (covering dates 04/14 to 04/20) was promptly posted in a clearly visible and accessible location, where residents, families, and staff can readily view it.

To enhance the currently compliant operations, on 05/01/2025 the Memory Care Director will ensure a designated staff member (Memory Care Director or care staff member) is assigned the responsibility to post the weekly menu every Friday by 3:00 PM for the upcoming week on the Activity bulletin board. A menu log checklist will be implemented to verify that the menus are updated and posted on time. The checklist will be reviewed and signed off weekly by the Memory Care Director, with a completion date of 06/30/2025.

Effective 05/01/2025 the Memory Care Director will perform weekly audits through 06/30/2025 to maintain ongoing compliance with preparing menus, stating the specific food being served at each meal for 1 week in advance and to follow the menu, and to post weekly menus 1 week in advance in a conspicuous and public place in the home. The Memory Care Director or designee will conduct weekly audits for eight weeks to ensure compliance with menu posting requirements. Results will be documented and reviewed in weekly management meetings. Continued monthly audits will be conducted thereafter as part of the facility's quality assurance program. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 05/17/2025

Implemented (████) **05/22/2025)**