



pennsylvania
DEPARTMENT OF HUMAN SERVICES

March 31, 2021

Mr. Kyle Henderson
Vice President
CSH Exton Lessee, LLC
1275 Pennsylvania Avenue, 2nd Floor
Washington D.C. 20004

RE: Arbor Terrace Exton
1000 Oaklands Boulevard
Exton, Pennsylvania 19341
License #: 147930

Dear Mr. Henderson:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspections on March 18, 2021 of the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because the home is new and not yet serving four or more residents.

In accordance with 55 Pa.Code § 2600.11(b) (relating to procedural requirements for licensure or approval of personal care homes, a re-inspection of your newly licensed facility will be conducted within 3 months of the effective date of this license. Complete compliance with all applicable regulations is required in order to maintain your license.

During the inspection, citations on the enclosed Licensing Inspection Summary were found. All citations specified on the Licensing Inspection Summary must be corrected by the dates specified on the Licensing Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Your NEW license is enclosed, based on substantial but not complete compliance with 55 Pa.Code Ch. 2600.

Sincerely,

Jamie Buchenauer
Deputy Secretary
Office of Long-term Living

Enclosures
License
Licensing Inspection Summary

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

Facility Information

Name: *Arbor Terrace Exton* License #: *14793* License Expiration Date:
 Address: *100 Oaklands Blvd, Exton, PA 19341, ,*
 County: *Chester* Region: *Southeast*

Administrator

Name: *Michael Hagarty* Phone: *4842492055* Email: *michael.hagarty@arborcompany.com*

Legal Entity

Name: *CSH Exton Lessee, LLC*
 Address: *1275 Pennsylvania Ave NW Second Floor, Washington D. C. 20004*
 Phone: *2024698401* Email: *kyle.henderson@cshpe.com*

Certificate(s) of Occupancy

Type: *I-1* Date: *01/11/2021* Issued By: *West Whiteland Township*

Staffing Hours

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

Inspection

Type: *Partial* Notice: *Announced* BHA Docket #:
 Reason: *New* Exit Conference Date: *03/18/2021*

Inspection Dates and Department Representative

03/18/2021 - On-Site: Youn Hie Chung

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *99* Residents Served: *0*

Secured Dementia Care Unit

In Home: *Yes* Area: *MC* Capacity: *32* Residents Served: *0*

Hospice

Current Residents: *0*

Number of Residents Who:

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

Inspections / Reviews

03/18/2021 - Partial

Lead Inspector: *Youn Hie Chung* Follow-Up Type: *POC Submission* Follow-Up Date: *04/04/2021*

Inspections / Reviews *(continued)*

3/26/2021 - POC Submission

Lead Reviewer: *Claire Mendez*

Follow-Up Type: *Document Submission*

Follow-Up Date: *04/15/2021*

3/29/2021 - Document Submission

Lead Reviewer: *Claire Mendez*

Follow-Up Type:

Follow-Up Date:

18 - Compliance With Laws

1. Requirements

2600.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

On 03/18/2021 at 09:40 AM, the home did not post influenza information in a conspicuous place as required by INFLUENZA AWARENESS ACT - ENACTMENT Act of Nov. 21, 2016, P.L. 1514, No. 173 Cl.

Plan of Correction

Accept

Immediate Solution

In order to immediately resolve this issue, the Resident Care Director printed and hung flu prevention and awareness posters in conspicuous locations throughout the community on Thursday, March 18, 2021. These were acknowledged by the DHS licensing inspector prior to the Exit Conference.

Sustainable Compliance

In order to ensure this violation does not occur again, the Resident Care Director will be responsible for monitoring the placement and condition of flu prevention and awareness posters on a monthly basis. If new guidance is shared, the Resident Care Director will be responsible for conspicuously posting this information, as well as educating residents and staff.

Timeline/Work Plan

Flu prevention and awareness posters were hung in conspicuous locations by the Resident Care Director on March 18, 2021.

The location and condition of flu prevention and awareness posters will be reviewed by the Resident Care Director on a monthly basis.

As new guidance is shared, the Resident Care Director will conspicuously post this information, as well as educate residents and staff.

Completion Date: 03/25/2021

Document Submission

Implemented

Please see JPG image 'Flu Poster - Hung on Wall Near Elevator on Third Floor', which was placed on Thursday, March 18, 2021.

Please also see the 'Flu Prevention Poster Checklist', which was generated on Thursday, March 25, 2021 and will be completed on a monthly basis by the Resident Care Director.

233c - Key-Locking Devices

1. Requirements

2600.

- 233.c. If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

Description of Violation

The directions for operating the home's locking mechanism are not conspicuously posted near the door to the enclosed court yard of the Secure Dementia Care Unit (SDCU) or near the door to the outside from the court yard.

233c - Key-Locking Devices (continued)

Plan of Correction

Accept

Immediate Solution

In order to immediately resolve this issue, the Maintenance Director posted the code for the doors' locking mechanism in conspicuous locations near the keypads on Thursday, March 18, 2021. These were acknowledged by the DHS licensing inspector prior to our Exit Conference.

Sustainable Compliance

In order to ensure this violation does not occur again, the Maintenance Director will be responsible for monthly checks on the condition of posted codes to ensure quality and visibility. If changes to the code are made, the Maintenance Director will be responsible for updating the code postings. Intermittently, if staff notices an issue with the condition of posted codes, a maintenance work order ticket will be created to resolve the issue.

Timeline/Work Plan

Code for the doors' locking mechanism were posted in conspicuous locations near the keypads by the Maintenance Director on Thursday, March 18, 2021.

The condition and visibility of the posted codes will be reviewed by the Maintenance Director on a monthly basis. If changes to the code are made, the Maintenance Director will be responsible for updating the code postings. If staff notices an issue with the condition of posted codes, a maintenance work order ticket will be created to resolve the issue.

Completion Date: 03/25/2021

Document Submission

Implemented

Please see JPG images 'Code Posted Near Door to Courtyard' and 'Code Posted Near Door to Outside of Courtyard', both of which were placed on Thursday, March 18, 2021.

Please also see the 'Codes Posting Monthly Checklist', which was generated on Thursday, March 25, 2021 and will be completed on a monthly basis by the Maintenance Director.