

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

October 2, 2025

[REDACTED] VP OF OPERATIONS
WEST CHESTER PA SENIOR PROPERTY LLC

RE: MERRILL GARDENS AT WEST
CHESTER
1201 WARD AVENUE
WEST CHESTER, PA, 19380
LICENSE/COC#: 14912

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/25/2025, 08/26/2025 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: MERRILL GARDENS AT WEST CHESTER License #: 14912 License Expiration: 11/14/2025
Address: 1201 WARD AVENUE, WEST CHESTER, PA 19380
County: CHESTER Region: SOUTHEAST

Administrator

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

Legal Entity

Name: WEST CHESTER PA SENIOR PROPERTY LLC
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-2 Date: 11/21/2017 Issued By: West Goshen Township

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 112 Waking Staff: 84

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
Reason: Renewal Exit Conference Date: 08/26/2025

Inspection Dates and Department Representative

08/25/2025 - On-Site: [REDACTED]
08/26/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
License Capacity: 94 Residents Served: 74
Secured Dementia Care Unit
In Home: Yes Area: Garden House Capacity: 23 Residents Served: 17
Hospice
Current Residents: 4
Number of Residents Who:
Receive Supplemental Security Income: NA Are 60 Years of Age or Older: 74
Diagnosed with Mental Illness: 21 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 38 Have Physical Disability: 1

Inspections / Reviews

08/25/2025 - Full
Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 09/21/2025

09/24/2025 - POC Submission
Submitted By: [REDACTED] Date Submitted: 09/27/2025
Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 09/28/2025

Inspections / Reviews *(continued)*

10/02/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/27/2025

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

17 - Record Confidentiality

1. Requirements

2600.

17. Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

Description of Violation

On 8/25/2025, at 10:32 am, the Health Services office area was unlocked, unattended, and accessible. 3 binders were present with resident information including the 24 hour communication report and task log for the 2nd floor. The medical evaluation for Resident 1 was present in the Health Services Director's office, also located in this area.

Plan of Correction

Accept () - 09/24/2025)

The 3 binders that were identified on the bookshelf in the Health Service area by the Surveyor during environmental rounds were immediately removed from the bookshelf and placed in the secured med room by the Guest Service Director. The Health Service office was immediately locked.

The Resident Care Director and Garden House Director are in process of conducting an in-service with all care staff on confidentiality. To be completed by September 26, 2025

The Resident Care Director/Designee will complete rounds weekly to ensure no resident information is unsecured. September 19th through December 19, 2025

The General Manager will conduct random rounds monthly x 3 months of the Health Service area to ensure compliance. September 19th through December 19, 2025

Licensee's Proposed Overall Completion Date: 09/26/2025

Implemented () - 10/02/2025)

100a - Exterior - Free of Hazards

2. Requirements

2600.

100.a. The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

Description of Violation

On 8/25/2025 at 10:20 am, there was a long hose sprawled on the ground in front of the courtyard exit posing a tripping hazard.

Plan of Correction

Accept () - 09/24/2025)

The hose identified on the ground in front of the courtyard exit during environmental rounds by the Surveyor, was immediately removed by the Garden House Director. This was an isolated instance and corrected during the survey. The Garden House Director/designee will conduct weekly rounds of the unit to ensure there are no tripping hazards. Starting September 19th through December 19, 2025

The General Manager will conduct random rounds monthly x 3 months beginning September 19th through December 19, 2025

Licensee's Proposed Overall Completion Date: 09/19/2025

Implemented () - 10/02/2025)

121a - Unobstructed Egress

3. Requirements

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

On 8/25/2025 at 10:00 am, a stuck door blocked egress from the home's dining room. The left side of the double doors would not open, creating a choke point if multiple residents were attempting to escape at the same time.

Plan of Correction

Accept ([REDACTED] - 09/24/2025)

The left side of the double doors in the Main Dining Room that did not open during the environmental rounds conducted by the Surveyor, was immediately fixed by the Director of Maintenance.

A switch on the door needed repair and was replaced. Executive Chef/Maintenance Director/designee will conduct weekly checks to ensure that the doors open without effort. Beginning September 19th through December 19, 2025. The General Manager will conduct random rounds monthly to ensure compliance. September 19th through December 19, 2025.

Licensee's Proposed Overall Completion Date: 09/19/2025

Implemented ([REDACTED] - 10/02/2025)