



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

AUG 19 2010

PHONE: (717) 783-3670
FAX: (717) 783-5662

Ms. Susan McClain, Administrator
Dunwoody Village, Inc.
Dunwoody Village
ATTN: Assisted Living Services
3500 West Chester Pike
Newtown Square, Pennsylvania 19073

Dear Ms. McClain:

As a result of the Department of Public Welfare's licensing inspection on June 8, 2010 and June 9, 2010 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.


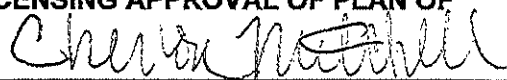
Sincerely,

A handwritten signature in cursive script that reads "Kevin T. Casey".

Kevin T. Casey
Deputy Secretary

Enclosures
License
Violation Report

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME Dunwoody Village 3500 West Chester Pike, Newtown Square, PA 19073		CURRENT LICENSE NUMBER 145250	
INSPECTION DATES June 8, 2010 and June 9, 2010		REGIONAL REPRESENTATIVES Paul Metzger, Sanford Stone	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) SUSAN McCLAIN LPN/AL Admin.			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 6/22/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 8/6/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
14c If a building is structurally renovated or altered after the initial fire safety approval is issued, the home shall submit the new fire safety approval, or written certification that a new fire safety approval is not required, from the appropriate fire safety authority. This documentation shall be submitted to the Department within 15 days of the completion of the renovation or alteration.	The home created a doorway in the wall to connect suites #147 and #148. The home did not have documentation of the approval of this alteration from the appropriate fire safety authority.	Pending ASAP	Maint: Director contacted an engineering company FX Barnes - I submitted certified drawing to L + L (lab & industry) on 6/25/10 for approval. Going to Harrisburg. Will submit approval upon receipt. Going to forward the renovations will be made without consent or approval from atd.	8/6/10 Ekm

**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

P. 2

6107234768

Dunwoody Cedars

Jul 06 2010 9:52AM

NAME AND ADDRESS OF PERSONAL CARE HOME Dunwoody Village 3500 West Chester Pike, Newtown Square, PA 19073		CURRENT LICENSE NUMBER 145250	
INSPECTION DATES June 8, 2010 and June 9, 2010		REGIONAL REPRESENTATIVES Paul Metzger, Sanford Stone	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Juan Inocencio</i>	DATE 6/22/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE 7/7/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
25b The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.	-Contracts had not been signed by resident #1 (03/29/2010), #2 (01/18/2010), and #3 (11/17/2010). -A new contract or contract addenda reflecting the rate increase effective 01/01/2010 had not been signed by residents #4, 5, 6 and 7.	Immediate Resolved All attached	As of 6/22/10 Residents 1 through 7 have signed contracts - See attached last page and all residents going forward will sign contracts or addendums upon admission or as changes to contract or rates are noted. Administrator will be	Steps have been taken to correct violation; full compliance is not verifiable Date: 7/7/10 Initials (DPW): <i>MM</i>

100% responsible for all contract signing as files are kept in her office. Admin. is in contact with resident

**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

P.3

6107234768

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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Susan McClain</i>	DATE 6/22/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE 7/7/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (Include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
41e A statement signed by the resident and, if applicable, the resident's designated person acknowledging receipt of a copy of the information specified in 41d, or documentation of efforts made to obtain signature, shall be kept in the resident's record.	Resident #1, 2, 3, 4 and 8 had not signed a statement acknowledging receipt of a copy of resident rights.	Resolved starting 6/11/10 and ending 6/22/10	All residents residing in A.L. were given Res. Rights and all residents signed. (See attached) Signed Res. Rights were placed in Res. files (charts). Same forwarded; all residents will sign res. rights during contract signing.	Steps have been taken to correct violation; full compliance is not verifiable Date 7/7/10 Initials (DPW) <i>[Signature]</i>

Administrator is 100% responsible for all signatures during contract signing. Res. rights document included in contract.

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INSPECTION DATES June 8, 2010 and June 9, 2010	REGIONAL REPRESENTATIVES Paul Metzger, Sanford Stone
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PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)

SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 6/22/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 7/7/10
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42s A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.	The home uses a video recording device in external public areas of the home and there was no notice of the recording to the residents through either a posted sign or through written resident notice.	Immediate Resolved on 6/17/10 See enclosed pictures & documentation	AL held a Resident Council meeting on 6/15/10 notifying residents of camera and surveillance. Signs were purchased and placed in entrance areas. Notice will go into all contracts going forward. Staff notified verbally.	7/7/10 CEW

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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Susan Meekins</i>	DATE 6/22/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheryl [Signature]</i>	DATE 7/7/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
144c The location of a smoking room or outside smoking area shall be a safe distance from heat sources, hot water heaters, combustible or flammable materials and away from common walkways and exits.	The location of an outside smoking area in the West Wing patio was in a common walkway.	Immediate 6/10/10 Resolved see attached photos	Smoking permitted signs were immediately removed by maintenance director. Ash tray was immediately removed by grounds director. No further action as we are a no-smoking area.	7/7/10 OLM

(Smoking on Campus. Ashtray on campus.)

although Dunwoody A.C. did not allow smoking, it is in our contract we are a smoking facility, but apparently we overlooked an area and had it removed an ash tray.