

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to WG CENTER CITY SH LLC  
LEGAL ENTITY

To operate ATRIA CENTER CITY  
NAME OF FACILITY OR AGENCY

Located at 150 NORTH 20TH STREET, PHILADELPHIA, PA 19103  
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE \_\_\_\_\_ ADDRESS OF SATELLITE SITE \_\_\_\_\_

ADDRESS OF SATELLITE SITE \_\_\_\_\_ ADDRESS OF SATELLITE SITE \_\_\_\_\_

ADDRESS OF SATELLITE SITE \_\_\_\_\_ ADDRESS OF SATELLITE SITE \_\_\_\_\_

To provide Personal Care Homes  
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 160  
(MAXIMUM CAPACITY)  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: \_\_\_\_\_

This certificate is granted in accordance with the Public Welfare Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes  
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from December 2, 2012 until December 2, 2013,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 136570

*Robert E. Robinson*

ISSUING OFFICER

*[Signature]*

DIRECTOR

NOTE: This certificate is issued for the above site(s) only and is not transferable  
and should be posted in a conspicuous place in the facility.

PW 628 - 01/11



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

DEC 31 2012

Mr. W. Bryan Hudson, Sr. VP, General Counsel and Secretary  
WG Center City SH, LLC  
401 South Fourth Street, Suite 1900  
Louisville, Kentucky 40202

RE: Atria Center City  
150 North 20<sup>th</sup> Street  
Philadelphia, Pennsylvania 19103

Dear Mr. Hudson:

As a result of the Department of Public Welfare's (Department) licensing inspection on October 1, 2012, October 2, 2012 and November 2, 2012 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 Human Services Licensing so that compliance can be verified.

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

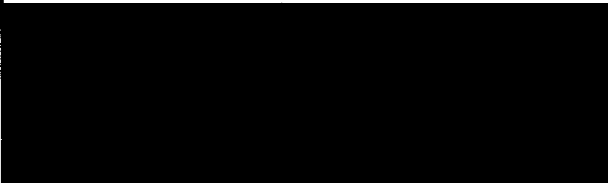
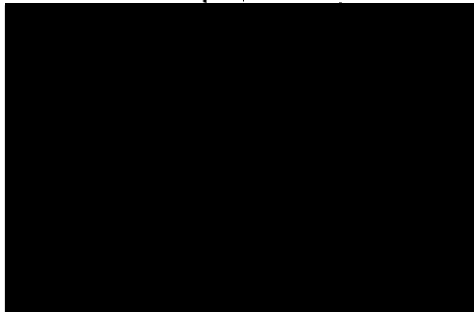
Sincerely,

A handwritten signature in black ink, appearing to read "R Melusky", with a long horizontal line extending to the right.

Ronald Melusky  
Director

Enclosures  
License  
Violation Report

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

PCH Name: Atria Center City		License Number:
Address: 150 N. 20th St., Philadelphia, PA 19103		County: Philadelphia
Administrator: Jody Thompson		Region: SOUTHEAST
Legal Entity Name: WG Center City SH, LLC		
Legal Entity Address: 401 S. Fourth St., Suite 1900, Louisville, KY 40202		
<b>Certificate(s) of Occupancy</b> I-1 07/01/1999 Department of Licenses & Is		
<b>Staffing Hours</b>		
Resident Support: 118	Total Daily Staff: 238	Waking Staff: 177
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
<b>Reason(s) for inspection(s).</b>		
Renewal		
<b>On-Site Inspections Dates and Department Representatives On-Site</b>		
10/01/2012: Kurtz, Andrea		
10/02/2012: Kurtz, Andrea		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
<b>Other Details</b>		
Partial or Full Triggers:	Random Indicators:	
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 160 Number of Residents Served: 92 Secured Dementia Care Unit In Home: No Area: Secured Dementia Unit Capacity, if Applicable: 	Number of Residents who: 	

Violation Report: 13860 - 10/01/2012 - Kurtz, Andrea  
 PCH Name: Atria Center City

**1. REGULATION 55 Pa.Code §2600**

2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.16 (relating to abuse reporting covered by law).

**2a. DESCRIPTION OF VIOLATION**

On 9/28/12, resident #1 had a fall in room that resulted in an admission to the hospital on 9/29/12 with the diagnosis of fractured ribs. The home did not submit an incident report to the Department by telephone or written until 10/01/12.

**3. PLAN OF CORRECTION (POC)** (Attach pages as necessary. Remember that you must sign and date any attached pages.)

*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

Please note that Atria Center City has submitted this Plan of Correction in order to comply with state regulatory provisions. The preparation and submission of this Plan of Correction does not constitute an admission of fault or liability on the part of Atria Center City or an agreement by Atria Center City regarding the truth or accuracy of the facts alleged or conclusions drawn.

**2600 (16c)**

The Resident Services Director will inservice all shift nurses on the state reportable incident process to ensure all state reportable incidents are called in or the full report is completed within the 24 hour guideline. The inservice training will be completed on or before October 31<sup>st</sup> 2012.

*See Attached com*

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Jody Thompson Executive Director</i>	Date <i>10/19/12</i>
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of 12/4/12  
 (Date)

Plan of correction implementation status as of 11/2/12  
 (Date)

The above plan of correction was approved by *[Initials]*  
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 13850 - 10/01/2012 - Kurtz, Andrea  
 PCH Name: Atria Center City

1. REGULATION 55 Pa.Code §2600  
 2600.25(b) - 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.

2a. DESCRIPTION OF VIOLATION  
 The contract for resident #1 was not signed by the resident.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)  
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

**2600.25(b)**

The Community Business Office Director will ensure all leases are signed by the resident upon physical move in. If the resident refuses to sign the lease there will be multiple attempts made and those attempts will be documented in the residents file.

*See Attached*

Repeat Violation: Yes      Date(s) of Previous Violation(s): 08/15/2011

Signature of Legal Entity Representative (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Jody Thompson Executive Director*      Date *10/19/12*

**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of 12/4/12 (Date)

Plan of correction implementation status as of 11/2/12 (Date)

The above plan of correction was approved by CTM (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 13650 - 10/01/2012 - Kurtz, Andrea  
 PCH Name: Atria Center City

1. REGULATION 55 Pa.Code §2600  
 2600.103(f) - Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

2a. DESCRIPTION OF VIOLATION  
 On 10/01/12, at approximately 11:00 am, there was no thermometer in the ice cream freezer, which was located in the main kitchen.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)  
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

2600.103(f)

A thermometer was immediately placed in the ice cream freezer. The culinary staff will check all refrigerators and freezers for a thermometer during each shift while recording the temperatures on the temperature logs sheet. If there is a thermometer missing the staff has been instructed to inform the Director of Culinary Services immediately and it will be replaced immediately. This issue was rectified immediately.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
Jody Thompson Executive Director	10/19/12

**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of 11/1/12  
 (Date)

The above plan of correction was approved by DEM  
 (Initials)

Plan of correction implementation status as of 11/2/12  
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 13650 - 10/01/2012 - Kurtz, Andrea  
 PCH Name: Atria Center City

1. REGULATION 55 Pa.Code §2600  
 2600.103(g) - Food shall be stored in closed or sealed containers.

2a. DESCRIPTION OF VIOLATION

Two packages of frozen sausage patties, containing approximately 30 patties per package and the package of frozen pizza crust in the walk in freezer, located in the main kitchen were opened and unsealed.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

2600.103(g)

All culinary staff will be inserviced on or before October 31, 2012 about the proper dating, labeling, and storage of all foods. The Director of Culinary Services or designee will monitor the proper storage, dating and labeling of all food products and reinforce as necessary.

*See Attached.com*

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative  
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Jody Thompson Executive Director* Date *10/19/12*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 12/4/12  
 (Date)

Plan of correction Implementation status as of 11/2/12  
 (Date)

The above plan of correction was approved by *JEM*  
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 13650 - 10/01/2012 - Kurtz, Andrea  
 PCH Name: Atria Center City

1. REGULATION 55 Pa.Code §2600  
 2600. 103(i) - Outdated or spoiled food or dented cans may not be used.

2a. DESCRIPTION OF VIOLATION

On 10/01/12, at approximately 11:00 am, two packages of sausage patties, two packages of pizza crust, a bag of mini baguettes and a package of five turkey burgers was not dated with a date of expiration or date received in the main kitchen walk in freezer.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

2600.103(i)

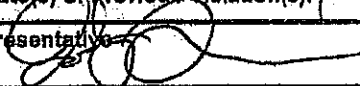
All culinary staff will be inserviced on or before October 31, 2012 about the proper dating, labeling, and storage of all foods. The Director of Culinary Services or designee will monitor the proper storage, dating and labeling of all food products and reinforce as necessary.

*See ATTACHED*

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)



Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page)

Jody Thompson Executive Director

Date 10/19/12

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of

12/4/12  
 (Date)

Plan of correction implementation status as of

11/2/12  
 (Date)

The above plan of correction was approved by

*JPT*  
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 13850 - 10/01/2012 - Kurtz, Andrea  
 PCH Name: Atria Center City

**1. REGULATION 55 Pa. Code §2600**

2600.171(b)(4) - If staff persons or volunteers of the home provide transportation for the residents, at least one staff member transporting or accompanying the residents shall have completed the Initial new hire direct care staff person training as specified in § 2600.65 (relating to direct care staff person training and orientation).

**2a. DESCRIPTION OF VIOLATION**

Staff person A hired 8/27/12 as a driver, has not completed the Initial new hire direct care staff person training.

**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)**

*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

2600.171(b)(4)

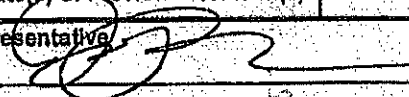
The driver completed the required DPW training prior to the conclusion of the DPW inspection. The Community Business Office Director will be inserviced on or before October 31, 2012 of the DPW training documentation requirements and will ensure all direct care staff have completed the DPW on-line training for direct caregivers or have a current CNA or nursing license on file prior to providing any direct care.

*See Attached cert*

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)



Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page)

Jody Thompson Executive Director

Date 10/19/12

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The above plan of correction is approved as of

12/4/12  
 (Date)

Plan of correction implementation status as of

11/2/12  
 (Date)

The above plan of correction was approved by

JRM  
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 13650 - 10/01/2012 - Kurtz, Andrea  
 PCH Name: Atria Center City

**1. REGULATION 55 Pa.Code §2600**

2600.186(c) - Changes in medication may only be made in writing by the prescriber, or in the case of an emergency, an alternate prescriber, except for circumstances in which oral orders may be accepted by nurses in accordance with regulations of the Department of State. The resident's medication record shall be updated as soon as the home receives written notice of the change.

**2a. DESCRIPTION OF VIOLATION**

On 10/02/12, the home had crossed out the PRN medications MAPAP 325 mg tablet and Prochlorperazine Maleate 10 mg tablet in the medication administration record for resident #2. The home had not received a written or verbal order from an authorized prescriber for the change.

**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)**

*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

2600.186(c)

The Resident Services Director will inservice all medication aids and LPNs on or before October 31, 2012 on documenting changes on MARS. The Resident Services Supervisor will monitor compliance on a weekly basis and reinforce as needed.

*See Attached*

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page)

Jody Thompson, Executive Director

Date 10/19/12

**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of

12/4/12  
 (Date)

Plan of correction implementation status as of

12/4/12  
 (Date)

The above plan of correction was approved by

*CPM*  
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

2600 (16C)

On 11/7/12 an inservice was completed with the managers that outlined the state reportable incidents. There is a manager on duty in the community 7 days per week. The manager on duty will be responsible to review all incident reports and complete the DPW reporting requirements if needed. This training will be added to the manager on duty training check-list for all newly hired managers

2600.25(b)

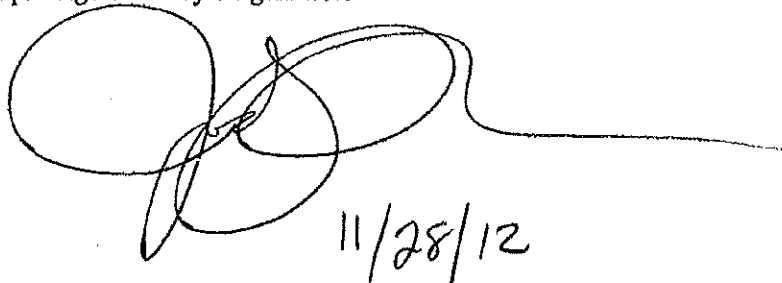
Resident #1 returned from rehab facility to the community 11/09/2012 and [REDACTED] lease was signed that same day.

2600.103 (g)

All culinary staff was inserviced on 11/7/12 about the proper dating, labeling, and storage of all foods. The Director of Culinary Services or designee will monitor the proper storage, dating and labeling of all food products daily and will reinforce as needed. Two packages of frozen sausage patties and the package of frozen pizza crust were discarded.

2600.103(i)

All culinary staff was inserviced on 11/7/12 about the proper dating, labeling, and storage of all foods. The Director of Culinary Services or designee will monitor the proper storage, dating and labeling of all food products daily and will reinforce as needed. Two packages of frozen sausage patties and the package of frozen pizza crust, a bag of mini baguettes and a package of turkey burgers were discarded.



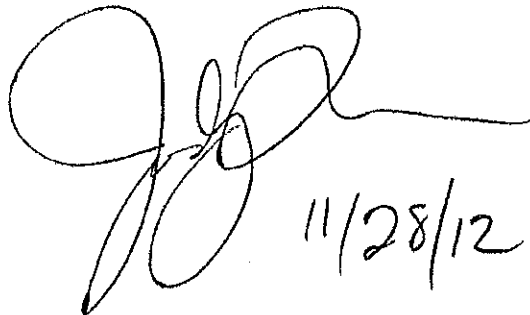
11/28/12

## 2600.171(b)(4)

All other drivers had a completed certification on file.  
Community Business Manager will add on-line DPW direct caregiver training and testing to the new hire orientation checklist to ensure compliance.

## 2600.186(c)

Resident Services Director or Designee will meet with outside providers and review Atria's medication program and ordering process on or before 12/31/2012. LPNs and Med-techs will be inserviced on the verbal and written order process on or before 12/31/2012



11/28/12