

Mr. Kenneth Williams, Executive Director
Five Star Quality Care NS Operator, LLC
400 Centre Street
Newton, Massachusetts 02458

MAR 3 1 2014

RE: The Devon Senior Living
445 North Valley Forge Road
Devon, Pennsylvania 19333

Dear Mr. Williams:

Thank you for your request for a waiver of 55 Pa.Code Ch. 2600 (relating to personal care homes). You have requested a waiver of 55 Pa.Code § 2600.54(a) (relating to qualifications for direct care staff persons) for [REDACTED]

Your request for waiver is being returned for additional information. Each waiver request must include documentation that the non-U.S. educational program is similar to or exceeds U.S. educational requirements. This includes, at a minimum, a transcript which lists the specific courses taken to earn the diploma (including dates of completion) and the date the individual earned the diploma. The transcript needs to show at least three years of schooling information. Transcript must be translated into English by a certified English translator.

Additional documentation submitted with the waiver request indicates that [REDACTED] received her education in Africa; however the documentation is illegible and does not appear to not show at least three years of schooling information. The waiver request also indicates that [REDACTED] is currently pursuing her CNA license, however no substantiating documentation was included. The Devon Senior Living will need to provide the Department with either a transcript from [REDACTED] high school showing at least three years of schooling information, or documentation (such as enrollment paperwork, letters from the CNA program acknowledging enrollment, and proposed completion date of program) from the CNA program in which she is currently enrolled.

Upon receipt of the above supporting documentation, a full and careful review of all documentation will occur. Please return the completed waiver request to Ms. Tara Pride, Director of Regulatory Implementation, Bureau of Human Services Licensing, Room 631 Health and Welfare Building, 625 Forster Street, Harrisburg, Pennsylvania 17120.

If you have any questions regarding the waiver process, you may contact the Operator Support Hotline at telephone number (866) 503-3926.

Sincerely,

A handwritten signature in black ink that reads "Tara Pride". The signature is written in a cursive style with a long, sweeping underline that extends to the left.

Tara Pride
Director of Regulatory Implementation