

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to FSP-DOYLESTOWN LP

LEGAL ENTITY

To operate THE SOLANA DOYLESTOWN

NAME OF FACILITY OR AGENCY

Located at 1621 EASTON ROAD, WARRINGTON, PA 18976

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

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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 129
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 34

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 November 20, 2014 until November 20, 2015,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **141210**

Robert E. Robinson

ISSUING OFFICER

Matthew J. [Signature]

ACTING 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 - 10/13



NOV 20 2014

Mr. Mark P. Maberry, Vice President
FSP-Doylestown, LP
Parkside Terrace East, 3820 Mansell Road, Suite 275
Alpharetta, Georgia 30009

RE: The Solana Doylestown
1621 Easton Road
Warrington, Pennsylvania 18976
License #: 141210

Dear Mr. Maberry:

As a result of the Department of Public Welfare's licensing inspection on November 10, 2014, 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 (related 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.

Your NEW license is enclosed.

Sincerely,

A handwritten signature in black ink that reads "Matthew Jones" followed by a stylized flourish or initials.

Matthew J. Jones
Director

Enclosures
License
Licensing Inspection Summary

Violation Report: 14121 - 11/10/2014 - McHale, Christine
PGH Name: The Solara Doylestown

1. REGULATION 55 Pa.Code §2600
2600.93(a) - Each ramp, interior stairway and outside steps must have a well-secured handrail.

2a. DESCRIPTION OF VIOLATION

The door that exits to the exterior of the home in stairwell one has approximately a half foot step down to the outside. This area does not have a handrail.

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.

A handrail was added to stairway within a Day of visit 11/17/14. We will have any stairway without handrail if found in building, we will add rail. Director of Maintenance will inspect all areas.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Matthew Knol

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

Matthew Knol

Date

11/17/14

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

The above plan of correction is approved as of

11/17/14
(Date)

Plan of correction implementation status as of

11/17/14
(Date)

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

The above plan of correction was approved by

JB
(Initials)