



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**

**MAILING DATE: JUL 20 2016**

Ms. Daniella Pantal  
Pennswood Village  
1382 Newtown-Langhorne Road  
Newtown, Pennsylvania 18940

RE: Pennswood Village Personal Care Home  
Certificate #: 126750

Dear Ms. Pantal:

As a result of the Department of Public Welfare's licensing inspection on 11/26/14 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read 'Patricia Adams', with a long horizontal flourish extending to the right.

Patricia Adams  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary

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

<b>PGH Name:</b> PENNSWOOD VILLAGE PERSONAL CARE HOME		<b>License Number:</b> 12675
<b>Address:</b> 1382 NEWTOWN LANGHORNE ROAD, NEWTOWN, PA 18940		<b>County:</b> Bucks
<b>Administrator:</b> Daniella Pantal		<b>Region:</b> SOUTHEAST
<b>Legal Entity Name:</b> PENNSWOOD VILLAGE		
<b>Legal Entity Address:</b> 1382 NEWTOWN-LANGHORNE ROAD, NEWTOWN, PA 18940		
<b>Certificate(s) of Occupancy</b>		
<b>Staffing Hours</b>		
<b>Resident Support:</b> 0	<b>Total Daily Staff:</b> 44	<b>Waking Staff:</b> 33
<b>Type of Inspection:</b> Partial	<b>BHA Docket Number:</b>	<b>Notice:</b> Unannounced
<b>Reason(s) for Inspection(s)</b>		
Incident		
<b>On-Site Inspections Dates and Department Representatives On-Site</b>		
11/26/2014: Kazimer, Lauren		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
12/01/2014: Kazimer, Lauren		
<b>Other Details</b>		
<b>Partial or Full Triggers:</b>		<b>Random Indicators:</b>
<b>Resident Demographic Data as of Inspection Dates</b>		
<b>Licensed Capacity:</b> 41 <b>Number of Residents Served:</b> 37 <b>Secured Dementia Care Unit in Home:</b> No <b>Area:</b> <b>Secured Dementia Unit Capacity, If Applicable:</b> <b>Number of Residents Served in Secured Dementia Care Unit, If applicable:</b> <b>Number of Current Hospice Residents:</b> 2 <b>Number of Hospice Residents in past year:</b> 2	<b>Number of Residents who:</b> <b>Receive Supplemental Security Income:</b> 0 <b>Are 60 Years of Age or Older:</b> 35 <b>Have Mental Illness:</b> 0 <b>Have an Intellectual Disability:</b> 0 <b>Have a Mobility Need:</b> 7 <b>Have a Physical Disability:</b> 0	

Violation Report: 12675 - 11/26/2014 - Kazimer, Lauren  
PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.225(c) - The resident shall have additional assessments as follows:

- (1) Annually.
- (2) If the condition of the resident significantly changes prior to the annual assessment.
- (3) At the request of the Department upon cause to believe that an update is required.

2a. DESCRIPTION OF VIOLATION

The most recent assessment for resident #1 was completed on 10/27/2014, and the previous assessment was completed on 8/29/2013.

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.*

Resident #1 has since been transferred to a different level of care. A better tracking system is currently in place. The administrator will audit monthly to ensure compliance. The home is in compliance with regulation 2600.225(c).

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) Daniella Pantal	Date 2/16/15
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of 3/3/15 (Date)

Plan of correction implementation status as of 3/3/15 (Date)

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

The above plan of correction was approved by  (Initials)