



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to WYNCOTE AID II OPCO LLC
LEGAL ENTITY

To operate WYNCOTE PLACE
NAME OF FACILITY OR AGENCY

Located at 240 BARKER ROAD, WYNCOTE, PA 19095
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

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 60
(MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.
Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 60

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 October 18, 2016 until April 18, 2017,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **142541**

Robert E. Robinson
ISSUING OFFICER

Jay Baul
DEPUTY SECRETARY

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.



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DEPARTMENT OF HUMAN SERVICES

OCT 21 2016

Mr. Daniel Guill, Authorized Signatory
Wyncote AID II OPCO LLC
330 N. Wabash Avenue, Suite 3700
Chicago, Illinois 60611

RE: Wyncote Place
240 Barker Road
Wyncote, Pennsylvania 19095
License #: 142541

Dear Mr. Guill:

As a result of the Department of Human Services' licensing inspection on October 12, 2016 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 (relating to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because this is a new legal entity operating the home.

During the inspection, violations on the enclosed License Inspection Summary were found. All violations specified on the 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.

Your PROVISIONAL license is enclosed, based on substantial but not complete compliance with 55 Pa.Code Ch. 2600.

Sincerely,

A handwritten signature in black ink that reads "Rowe".

Jacqueline L. Rowe
Director

Enclosures
License
License Inspection Summary

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

PCH Name: Wyncote Place		License Number: 14284	
Address: 240 Barker Road, Wyncote, PA 19095		County: Montgomery	
Administrator: Jacqueline Gelger		Region: SOUTHEAST	
Legal Entity Name: Wyncote AID II OPCO LLC			
Legal Entity Address: 330 N. Wauash Avenue, Chicago, IL 60611			
Certificate(s) of Occupancy C2/LP 04/30/1998 Commonwealth PA L&I			
Staffing Hours			
Resident Support:		Total Daily Staff: 98	Working Staff: 72
Type of Inspection: Partial		BHA Docket Number:	Notice: Announced
Reason(s) for Inspection(s) New			
On-Site Inspections Dates and Department Representatives On-Site 10/12/2016: Adams, Patricia			
Off-Site Inspection Dates and Inspectors, If Applicable			
Other Details			
Partial or Full Triggers:		Random Indicators:	
Resident Demographic Data as of Inspection Dates			
Licensed Capacity: 60 Number of Residents Served: 48 Secured Dementia Care Unit In Home: Yes Area: Entire home Secured Dementia Unit Capacity, If Applicable: 60 Number of Residents Served in Secured Dementia Care Unit, If applicable: 48 Number of Current Hospice Residents: 8 Number of Hospice Residents in past year: 30		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 48 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 48 Have a Physical Disability: 1	

Violation Report: 14264 - 10/12/2016 - Adams, Patricia
 PCH Name: Wyncote Place

1. REGULATION 55 Pa.Code §2800

2800.17 - Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

2a. DESCRIPTION OF VIOLATION

On 10/12/16, resident records were unlocked and accessible in the 2nd floor nurse station. Resident records are stored in two unsecured bookshelves behind the nurse station with a computer located atop the desk. The computer was open with information pertaining to a resident on the screen.

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.

2600.17 - [redacted] owner of Lamagination Cabinetry, maker of nurse's station, scheduled to come to facility on Thursday, 10/20/16 to provide quote for regulatory improvements to nurse's station. Necessary improvements to be completed by November 30, 2016. Currently, open area of nurse's station secured with plywood to prevent access; computer inaccessible from outside of nurse's station with current preventative measures. Nurse's station entry way locked; Charge Nurse, Med Tech, RCD, and ED with keys for access.

Nursing staff to be in-serviced on HIPPA/Resident Privacy by RCD and ED. In-Service to begin 10/19/16; to be completed by 10/28/16.

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page) *Jacqueline Geiger*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Jacqueline Geiger, Executive Director* Date *10-17-16*

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

The above plan of correction is approved as of 10/17/16 (Date)

Plan of correction implementation status as of 10/17/16 (Date)

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

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

Violation Report: 14254 - 10/12/2016 - Adams, Patricia
 FCH Name: Wyncole Place

1. REGULATION 55 Pa.Code §2600
 2600.85(a) - Sanitary conditions shall be maintained.

2a. DESCRIPTION OF VIOLATION
 On 10/12/16, there was a strong smell of garbage permeating the kitchen area where the grease trap is located..

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.

2600.85(a) – Work for replacement grease trap requisitioned (see attached). Current grease trap is not vented to the outside, causing odors to be trapped in grease trap area. Replacement grease trap to be vented to the outside to eliminate odors at grease trap site. Requisitioned work to start on Tuesday, October 25, 2016.

Repeat Violation: No Date(s) of Previous Violation(s):

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Violation Report: 14254 - 10/12/2016 - Adams, Patricia
 PCH Name: Wyncote Place

1. REGULATION 55 Pa.Code §2600
 2600.88(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION
 A knob is missing from the cabinet in 2 west dining room; exposing a protruding screw and posing a hazard to residents.

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

2600.88(a) – Knob replaced on date of inspection (10/12/16). Going forward, Maintenance and Housekeeping staff will inspect cabinetry knobs twice weekly (Monday and Thursday) and as needed; knobs will be replaced as needed to insure regulatory compliance.

Repeat Violation: No Date(s) of Previous Violation(s):

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Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Jacqueline Geiger, Executive* Date *10-17-16*

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Violation Report: 14254 - 10/12/2016 - Adams, Patricia
 PCH Name: Wyncote Place

1. REGULATION 55 Pa.Code §2600
 2600.94(b) - Interior stairs, exterior steps and ramps must have nonskid surfaces.

2a. DESCRIPTION OF VIOLATION

The non-skid surface tape is peeling off the stairs located in the fire tower, stairwell #3, starting on the second floor and ending at the basement. The peeling tape presents a hazard for residents.

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.

2600.94(b) – Replacement non-skid surface tape ordered 10/14/16, with an expected delivery date of 10/17/16 (see attached). Maintenance will replace all peeling non-skid surface tape in all stairwells with an anticipated completion date of 11/18/16. Going forward, Maintenance will inspect stairwell tape monthly (on the 1st of the month) and replace any peeling tape as needed.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Jacqueline Geiger

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

Jacqueline Geiger, Executive Director

Date 10-17-16

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 (Date)

The above plan of correction was approved by

JG
 (Initials)

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

Violation Report: 14264 - 10/12/2016 - Adams, Patricia
 PCH Name: Wyncote Place

1. REGULATION 66 Pa.Code §2600
 2600.95 - Furniture and equipment must be in good repair, clean and free of hazards.

2a. DESCRIPTION OF VIOLATION

- The plastic cover for the fire extinguisher located in 2 west dining room is broken.
- The wood veneer is missing from the common bathroom sinks edges and the corner cabinet located in 2 west dining room.
- The finish on the front of the cabinet located in 2 west dining room is worn.
- The fire place, located on the second floor, is missing tile along the side and top of the opening and exposing foundation.

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.

2600.95 – The plastic cover for the fire extinguisher was replaced on 10/17/16. Going forward, Maintenance will inspect fire extinguisher covers monthly (on the 1st of the month) and replace any broken covers as needed.

- Replacement porcelain sinks ordered from plumbing supplier with an estimated delivery date of 10/17/16. Sinks will be replaced by Maintenance Director with a work completion date of 10/28/16.
- Area of unfinished cabinetry removed from 2 West dining room on 10/17/16.
- Areas of missing tile on second floor fire place filled and smoothed with grout by paid contractor on 10/17/16.

Repeat Violation: No Date(s) of Previous Violation(s):

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 (Required on EVERY Page) *Jacqueline Geiger*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Jacqueline Geiger, Executive Director* Date *10-17-16*

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Violation Report: 14254 - 10/12/2016 - Adams, Patricia
 PCH Name: Wyncote Place

1. REGULATION 55 Pa.Code §2800
 2600.100(a) - The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION
 - Mortar/grout is missing at the bottom exterior of the administrator's office window.
 - There is an open grassy knoll with an approximate 20 foot drop along one side of the home's driveway.
 - The top portion of the stone turret patio and stair way is missing mortar between several of the large stones.

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.

2600.100(a) -- Mortar/grout missing from the bottom exterior window of the administrator's office repaired by a paid contractor on 10/17/16.
 - Quote received from fencing contractor (see attached) to install 6 foot stockade fencing along the length of "drop" alongside driveway. Work to be completed 11/5/16 and 11/6/16, weather permitting.
 - Mortar missing from stone turret patio repaired by paid contractor on 10/17/16.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Violation Report: 14264 - 10/12/2016 - Adams, Patricia
 PCH Name: Wyncote Place

1. REGULATION 55 Pa.Code §2600
 2600.101(j)(3) - Each resident shall have the following in the bedroom: Pillows, bed linens and blankets that are clean and in good repair.

2a. DESCRIPTION OF VIOLATION
 The bed next to the window in room #220, does not have a pillow.

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.

**2600.101(j)(3) – Pillow replaced on date of inspection.
 Going forward, Housekeeping staff and Nursing staff will monitor resident rooms daily and insure that all resident beds have clean pillows in good repair.**

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Jacqueline Geiger, Executive Director* Date *10-17-16*

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Violation Report: 14254 - 10/12/2016 - Adams, Patricia
 PCH Name: Wyncote Place

1. REGULATION 56 Pa.Code §2600
 2600.101(r)(2) - Window coverings must be clean, in good repair, provide privacy and cover the entire window when drawn.

2a. DESCRIPTION OF VIOLATION
 The window coverings on the window located in room #218 are in poor repair.

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.

2600.101(r)(2) – Window blind in room #218 replaced on date of inspection. Additional replacement blinds ordered (see attached). Going forward, Maintenance and Housekeeping staff will monitor resident room blinds daily and replace broken blinds as needed.

Repeat Violation: No Date(s) of Previous Violation(s):

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 (Required on EVERY Page) *Jacqueline Geiger*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Jacqueline Geiger Executive Director* Date *10-17-16*

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Violation Report: 14264 - 10/12/2016 - Adams, Patricia
 PCH Name: Wyncote Place

1. REGULATION 55 Pa.Code §2800
 2600.103(b) - Kitchen surfaces must be of a nonporous material and cleaned and sanitized after each meal.

2a. DESCRIPTION OF VIOLATION

The front of the dishwasher and a metal shelf located in the dishwasher area were not sanitized.

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(b) – Dishwasher and metal shelf sanitized on date of inspection. Going forward, Dietary Manager will insure that Dietary staff are following department cleaning schedule daily (see attached).

The dietary staff will be trained on cleaning and sanitizing of the dishwasher area within 30 days of receipt of the POC. (u)

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Violation Report: 14254 - 10/12/2016 - Adams, Patricia
 PCH Name: Wyncote Place

1. REGULATION 56 Pa.Code §2600
 2600.103(d) - Food shall be stored off the floor.

2a. DESCRIPTION OF VIOLATION
 On 10/12/16, one stack of four cases of water was stored on the floor in dry storage.

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(d) – Cases of water moved from floor of dry storage and put on wood pallet on date of inspection. Going forward, Dietary Manager will inspect storage areas daily and insure that all boxes are raised off floor.

Dietary staff will be trained on food storage within 30 days of receipt of the approved POC.

Repeat Violation: No Date(s) of Previous Violation(s):

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Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Jacqueline Geiger, Executive Director* Date *10-17-16*

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Violation Report: 14264 - 10/12/2016 - Adams, Patricia
 PCH Name: Wyncole Place

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

2a. DESCRIPTION OF VIOLATION
 The container of ice cream in the freezer, located in the kitchen, was 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) – Container of ice cream removed from freezer and disposed of on date of inspection. Going forward, Dietary staff will remove any containers with ill-fitting lids from freezer area. Alternate storage containers will be used for food products as needed.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Jacqueline Gerger, Executive Director</i>	Date <i>10-17-16</i>
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