



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to HSRE-WSL OF WEXFORD VI TRS LLC
LEGAL ENTITY

To operate THE WATERS OF WEXFORD
NAME OF FACILITY OR AGENCY

Located at 210-212 FOWLER ROAD, WARRENDALE, PA 15086
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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To provide Assisted Living-Special Care
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 143
(MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.
Special Care Unit - 55 Pa.Code §§ 2800.231-239 - Capacity 29

Restrictions: _____

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

55 Pa.Code Chapter 2800: Assisted Living Residences
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from February 21, 2019 until February 21, 2020,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **449360**

Robert E. Robinson
ISSUING OFFICER

Carolyn K. Ellison
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

MAR 01 2019

Lynn Carlson Shell
Chief Executive Officer
HSRE – WSL of Wexford, VI TRS, LLC
1600 Hopkins Crossroads
Minnetonka, MN 55305

RE: The Waters of Wexford
210-212 Fowler Road
Warrendale, PA 15086
License #: 449360

Dear Ms. Shell:

As a result of the Department's Bureau of Human Services Licensing annual inspection on January 16, 2019, of the above facility, the violations with 55 pa. Code Ch. 2800 (relating to Assisted Living Residence) specified on the enclosed violation report were found.

All citations 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. 2800 must be maintained.

A regular license is being issued based on the enclosed violation report. Your license is enclosed.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential.

MS. Lynn Carlson Shell

The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Rowe', written in a cursive style.

Jacqueline L. Rowe
Director

Enclosures
License
Violation Report

LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

ALR Name: The Waters of Wexford	License Number: 449361
Address: 210-212 Fowler Road, Warrendale, Pennsylvania 15068	County: Allegheny
Administrator: Kathy Yahner	
Legal Entity Name: HSRE-WSL of Wexford, VI TRS, LLC Lynn Carlson Schell, CEO	
Legal Entity Address: 1600 Hopkins Crossroad, Minnetonka, MN 55305	
Certificate(s) of Occupancy: I-1, I-2, Marshall Township, May 17, 2018	
Type of Inspection: Full	
Reason(s) for Inspection(s): 3 month new residence full inspection	
On-Site Inspections Dates and Department Representatives On-Site: 1/16/2019 Jan Cutter, Vicki Pfaff and Lauren Spagna	
Off-Site Inspection Dates and Inspectors, if Applicable: N/A	
Resident Demographic Data as of Inspection Dates	
Licensed Capacity: 143 Number of Residents Served: 9 Secured Dementia Care Unit in Residence: yes Area: 2 floors on right side of building. Secured Unit Capacity, if Applicable: 29 Number of Residents Served in Secured Dementia Care Unit, if applicable: 5 Number of Current Hospice Residents: 0 Number of Hospice Residents in past year: 0	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 9 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 5 Have a Physical Disability: 0

LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

ALR Name: The Waters of Wexford	License Number: 449361
Address: 210 – 212 Fowler Road, Warrendale, Pennsylvania 15086	County: Allegheny

Regulation: § 2800.85 (d) Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.
Violation The trash can in the women's common restroom in the lobby does not have a cover.

Plan of Correction

The built-in trash receptacle was removed from the wall and replaced with a free standing garbage can with a nonremoveable lid.

Within 10 days of receipt of the plan of correction: A designated staff person will check all kitchens and bathrooms to ensure trash is kept in a covered trash receptacle.

JW 2/6/19

Printed Name and Title of Legal Entity Representative (Required on all pages) Kathy Yahner <i>Regional Director</i>	
Signature of Legal Entity Representative (Required on all pages) <i>Kathy Yahner</i>	Date 2/4/2019

DEPARTMENT USE ONLY – RESIDENCES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>2/6/19</u> (Date)	Plan of correction implementation status as of <u>2/6/19</u> (Date)
The above plan of correction was approved by <u><i>JW</i></u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented – Adequate Progress <i>JW</i> <input type="checkbox"/> Partially Implemented – Inadequate Progress <input type="checkbox"/> Not Implemented

LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

ALR Name: The Waters of Wexford	License Number: 449361
Address: 210 – 212 Fowler Road, Warrendale, Pennsylvania 15086	County: Allegheny
Regulation: § 2800.132(c) A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the residence at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.	
Violation The fire drill record for the drill conducted on 12/29/2018 does not include the exit route used or the number of residents in the building at the time of the drill. <div style="text-align: center; margin-top: 20px;"> <i>JW</i> 2/6/19 </div>	
Plan of Correction The Maintenance Director from today forward will be utilizing the form recommended by DHS for each fire drill completed and will be specific with details including the exit route used at the time of each fire drill Immediately: The administrator or designee will check the fire drill record monthly to ensure it includes all required content in accordance with 2800.132c.	

Printed Name and Title of Legal Entity Representative (Required on all pages) Kathy Yahner Regional Director	
Signature of Legal Entity Representative (Required on all pages) <i>Kathy Yahner</i>	Date 2/4/2019

DEPARTMENT USE ONLY – RESIDENCES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>2/6/19</u> (Date)	Plan of correction implementation status as of <u>2/6/19</u> (Date)
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