



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF HUMAN SERVICES



CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to LCS DOYLESTOWN LLC

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

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

(MAXIMUM CAPACITY)

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

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

This certificate is granted in accordance with the Human Services 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 September 11, 2020 until September 11, 2021,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **145310**

Robert E. Robinson

ISSUING OFFICER

Jamie J. Buchenauer

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.



pennsylvania

DEPARTMENT OF HUMAN SERVICES

September 11, 2020

Ms. Diane C. Bridgewater
Executive Vice President and Secretary
LCS Doylestown, LLC
400 Locust Street, Suite 820
Des Moines, Iowa 50309

RE: The Solana Doylestown
1621 Easton Road
Warrington, Pennsylvania 18976
License #: 145310

Dear Ms. Bridgewater:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspections on August 4, 2020 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.

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.

During the inspection, citations on the enclosed Licensing Inspection Summary were found. All citations specified on the Licensing Inspection Summary must be corrected by the dates specified on the Licensing Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

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

Sincerely,

Jamie Buchenauer
Deputy Secretary
Office of Long-term Living

Enclosures
License
Licensing Inspection Summary

**Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY**

Facility Information

Name: *The Solana Doylestown* License #: *14531* License Expiration Date:
 Address: *1621 Easton Road, Warrington, Pa 18976*
 County: *BUCKS* Region: *SOUTHEAST*

Administrator

Name: *Jennifer Armagost* Phone: *267-282-4168* Email:
armagostjennifer@thesolanadoylestown.com;
shparker@pa.gov

Legal Entity

Name: *LCS Doylestown LLC*
 Address: *400 Locust Street, Suite 820, Des Moines, Iowa, 50309*
 Phone: *515-575-4500* Email: *largemegan@lcsnet.com*

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *09/22/2014* Issued By: *Township of Doylestown*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *112* Waking Staff: *84*

Inspection

Type: *Partial* Notice: *Announced* BHA Docket #:
 Reason: *Change Legal Entity* Exit Conference Date: *08/04/2020*

Inspection Dates and Department Representative

08/04/2020 - On-Site: Michele Swisher, Jennie Heinberg

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *129* Residents Served: *84*

Secured Dementia Care Unit

In Home: *Yes* Area: *Capacity: 34* Residents Served: *21*
Memory Care- First Floor

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *84*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *28* Have Physical Disability: *0*

Inspections / Reviews

08/04/2020 - Partial

Lead Inspector: *Michele Swisher*

Follow-Up Type: *POC Submission*

Follow-Up Date: *08/19/2020*

8/14/2020 - POC Submission

Lead Reviewer: *Shawn Parker*

Follow-Up Type: *Document Submission*

Follow-Up Date: *08/24/2020*

233c - Key-Locking Devices

1. Requirements

2600.

233.c. If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

Description of Violation

The two emergency exit doors located in the Secure Dementia Care Unit are equipped with a key pad device. The directions or code for the key pads are not posted in a conspicuous location near the doors.

Plan of Correction

Accept

The two doors that were missing the codes had recently been painted. The codes were removed for that purpose. The codes were re-posted at the time of inspection. The Director of Plant Operations has added the direction of monitoring the placement of door codes to the weekly Maintenance/Housekeeping Schedule.

Completion Date: 08/14/2020