

Department of Human Services
Bureau of Human Service Licensing

October 30, 2020

DIANE MORRIS, PARALEGAL
SQR OPCO LLC
300 EAST MARKET ST, SUITE 100
LOUISVILLE, KY 40202

RE: ATRIA LAFAYETTE HILL
9303 RIDGE PIKE
LAFAYETTE HILL, PA, 19444
LICENSE/COC#: 14665

Dear Ms. Morris,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/08/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Shawn Parker

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *ATRIA LAFAYETTE HILL* License #: *14665* License Expiration Date: *05/12/2021*
 Address: *9303 RIDGE PIKE, LAFAYETTE HILL, PA 19444*
 County: *MONTGOMERY* Region: *SOUTHEAST*

Administrator

Name: *Kimberly Baker* Phone: *2677687779* Email:
casey.counsellor@atriaseniorkliving.com;
shparker@pa.gov

Legal Entity

Name: *SQR OPCO LLC*
 Address: *300 EAST MARKET ST, SUITE 100, LOUISVILLE, KY, 40202*
 Phone: *2677687779* Email: *DIANE.MORRIS@ATRIASENIORKLIVING.COM*

Certificate(s) of Occupancy

Type: *I-1* Date: *03/09/2020* Issued By: *Twp of springfield*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *37* Waking Staff: *28*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Monitoring* Exit Conference Date: *10/08/2020*

Inspection Dates and Department Representative

10/08/2020 - On-Site: Jennie Heinberg

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *170* Residents Served: *23*

Secured Dementia Care Unit

In Home: *Yes* Area: *Life Guidance 1st* Capacity: *34* Residents Served: *14*

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *34*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *14* Have Physical Disability: *0*

Inspections / Reviews

10/08/2020 - Partial

Lead Inspector: *Jennie Heinberg*

Follow-Up Type: *POC Submission*

Follow-Up Date: *10/30/2020*

10/22/2020 - POC Submission

Lead Reviewer: *Shawn Parker*

Follow-Up Type: *Document Submission*

Follow-Up Date: *10/29/2020*

10/30/2020 - Document Submission

Lead Reviewer: *Shawn Parker*

Follow-Up Type: *Not Required*

3c - Post Current License

1. Requirements

2600.

- 3.c. The personal care home shall post the current license, a copy of the current license inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

Description of Violation

On 10/8/2020 the home's current inspection summary, dated 4/24/2020, was not posted in a conspicuous and public place in the home.

Plan of Correction

Accept

A binder was created at the time of inspection and the binder with the then current inspection was placed at the front desk. Staff was trained on the binder's location and right to public viewing. Any future inspection summaries will be placed in the binder by the Executive Director. Violation corrected at time of inspection.

Completion Date: 10/08/2020

Document Submission

Implemented

A binder was created at the time of inspection and the binder with the then current inspection was placed at the front desk. Staff was trained on the binder's location and right to public viewing. Any future inspection summaries will be placed in the binder by the Executive Director. Violation corrected at time of inspection.