

Department of Human Services  
Bureau of Human Service Licensing

May 26, 2022

[REDACTED]  
SHP V WILLISTOWN LLC  
3715 NORTHSIDE PKWAY NW 300-110  
ATLANTA, GA, 30327

RE: ARBOR TERRACE WILLISTOWN  
1713 WEST CHESTER PIKE  
WEST CHESTER, PA, 19382  
LICENSE/COC#: 14245

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 04/14/2022, 04/15/2022, 04/18/2022, 04/27/2022, 05/02/2022, 05/12/2022, 05/19/2022 of the above facility, no regulatory citations have been identified as a result of this inspection.

Sincerely,  
Claire Mendez

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: *ARBOR TERRACE WILLISTOWN* License #: *14245* License Expiration: *07/19/2023*  
Address: *1713 WEST CHESTER PIKE, WEST CHESTER, PA 19382*  
County: *CHESTER* Region: *SOUTHEAST*

**Administrator**

Name: [REDACTED] Phone: *6107251713* Email: [REDACTED]

**Legal Entity**

Name: *SHP V WILLISTOWN LLC*  
Address: *3715 NORTHSIDE PKWAY NW 300-110, ATLANTA, GA, 30327*  
Phone: *6107251713* Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *I-2* Date: *08/29/2013* Issued By: *Willistown Township*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *108* Waking Staff: *81*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Complaint, Incident* Exit Conference Date: *05/19/2022*

**Inspection Dates and Department Representative**

04/14/2022 - On-Site: [REDACTED]  
04/15/2022 - On-Site: [REDACTED]  
04/18/2022 - Off-Site: [REDACTED]  
04/27/2022 - Off-Site: [REDACTED]  
05/02/2022 - Off-Site: [REDACTED]  
05/12/2022 - Off-Site: [REDACTED]  
05/19/2022 - Off-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *104* Residents Served: *70*

**Secured Dementia Care Unit**

In Home: *Yes* Area: *Evergreen* Capacity: *35* Residents Served: *27*

**Hospice**

Current Residents: *6*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *69*  
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *38* Have Physical Disability: *0*

Inspections / Reviews

04/14/2022 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: *Not Required*

NO DEFICIENCIES FOUND