

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC

September 1, 2026

[REDACTED]
SNH PENN TENANT LLC
[REDACTED]

ATTN LICENSING
[REDACTED]

RE: NEWSEASONS AT NEW BRITAIN
800 MANOR DRIVE
CHALFONT, PA, 18914
LICENSE/COC#: 14508

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/27/2026 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: NEWSEASONS AT NEW BRITAIN

License #: 14508

License Expiration: 01/01/2027

Address: 800 MANOR DRIVE, CHALFONT, PA 18914

County: BUCKS

Region: SOUTHEAST

Administrator

Name:

Phone:

Email:

Legal Entity

Name: SNH PENN TENANT LLC

Address:

Phone:

Email:

Certificate(s) of Occupancy

Type: C-2 LP

Date: 04/15/1998

Issued By: PA L&I

Type: Other

Date: 04/19/2007

Issued By: New Britain Township

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 94

Waking Staff: 71

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Complaint, Incident

Exit Conference Date: 07/27/2026

Inspection Dates and Department Representative

07/27/2026 - On-Site

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 100

Residents Served: 74

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 5

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 74

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 20

Have Physical Disability: 0

Inspections / Reviews

07/27/2026 Partial

Lead Inspector:

Follow-Up Type: POC Submission

Follow-Up Date: 08/17/2026

08/17/2026 - POC Submission

Submitted By:

Date Submitted: 09/01/2026

Reviewer:

Follow-Up Type: Document Submission Follow-Up Date: 09/03/2026

Inspections / Reviews (*continued*)

09/01/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/01/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

141a 1 10 Medical Evaluation Information

1. Requirements

2600.

- 141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:
1. A general physical examination by a physician, physician's assistant or nurse practitioner.
 2. Medical diagnosis including physical or mental disabilities of the resident, if any.
 3. Medical information pertinent to diagnosis and treatment in case of an emergency.
 4. Special health or dietary needs of the resident.
 5. Allergies.
 6. Immunization history.
 7. Medication regimen, contraindicated medications, medication side effects and the ability to self administer medications.
 8. Body positioning and movement stimulation for residents, if appropriate.
 9. Health status.
 10. Mobility assessment, updated annually or at the Department's request.

Description of Violation

Resident [REDACTED]'s medical evaluation, dated [REDACTED], did not include medical information pertinent to diagnoses and treatment, or whether the resident's needs can be met safely in the home.

Plan of Correction

Accept [REDACTED] - 08/17/2026)

*On 7/27/26, primary care provider (PCP) for resident [REDACTED] completed a new documentation of medical evaluation (DME) which is compliant with regulation 141a 1-10, including the medical information pertinent to diagnoses and treatment and that the resident's needs can be met safely in the home.

*On 7/27/26, Division Director of Resident Care (DDRC) retrained the Director of Health and Wellness (DHW) on regulation 141a 1-10.

*By 8/28/26, DHW or designee will audit current residents' DMEs to ensure compliance with regulation 141a 1-10. If any areas of noncompliance are identified, DHW or designee will immediately contact resident's PCP to either obtain permission to update the current DME, when allowable, or if the current DME can't be updated, a request will be made for PCP to complete a new DME.

*Starting the week of 8/31/26, DHW or designee will audit 3 residents' DMEs twice weekly for 4 weeks then weekly for 4 weeks then biweekly for 4 weeks to ensure ongoing compliance with regulation 141a 1-10. If any areas of noncompliance are identified, DHW or designee will immediately contact resident's PCP to either obtain permission to update the current DME, when allowable, or if the current DME can't be updated, a request will be made for PCP to complete a new DME.

*Starting in September 2026, the Executive Director (ED) or designee will review the DME audits completed by the DHW or designee monthly for 3 months to ensure ongoing compliance with regulation 141a 1-10. The findings will be reviewed as part of the community's Quality Management Plan.

Licensee's Proposed Overall Completion Date: 08/31/2026

Implemented [REDACTED] - 09/01/2026)

224a Preadmission Screen Form

2. Requirements

2600.

224.a. A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

Description of Violation

Resident [REDACTED] preadmission screening form, dated [REDACTED], does not include a determination that the needs of the resident can be met by the services provided by the home.

Resident [REDACTED] preadmission screening form, dated [REDACTED], does not include a determination that the needs of the resident can be met by the services provided by the home.

Resident [REDACTED] preadmission screening form, dated [REDACTED], does not include a determination that the needs of the resident can be met by the services provided by the home.

Plan of Correction

Accept [REDACTED] - 08/17/2026)

*On 7/27/26, the DHW or designee updated the preadmission screening forms for residents [REDACTED] and [REDACTED] to designate that the needs of the residents can be met by the services provided by the home. It was documented as a late entry on this date to rectify the area of noncompliance identified in this survey.

*On 7/27/26, DDRC retrained the DHW on regulation 224a.

*By 8/28/26, DHW or designee will audit current residents' preadmission screening forms to ensure compliance with regulation 224a. If any areas of noncompliance are identified, DHW or designee will immediately update preadmission screening form, if allowable, as a late entry on that date to rectify the area of noncompliance identified in the audit.

*Starting the week of 8/31/26, DHW or designee will audit 3 residents' preadmission screenings twice weekly for 4 weeks then weekly for 4 weeks then biweekly for 4 weeks to ensure ongoing compliance with regulation 224a. If any areas of noncompliance are identified, DHW or designee will immediately update the preadmission screening form, if allowable, as a late entry on that date to rectify the area of noncompliance identified in the audit.

*Starting in September 2026, the Executive Director (ED) or designee will review the preadmission screening audits completed by the DHW or designee monthly for 3 months to ensure ongoing compliance with regulation 224a. The findings will be reviewed as part of the community's Quality Management Plan.

Licensee's Proposed Overall Completion Date: 08/31/2026

Implemented [REDACTED] - 09/01/2026)