



May 22, 2014

Jordan Hantz, Director
SeniorCARE Greene
55 Sugar Run Road, Suite 104
Waynesburg, PA 15370

RE: SeniorCARE Greene
License # 084950 - Regular

Dear Mr. Hantz:

As a result of the Department of Aging's Licensing Inspection on 03/20/2014, we have found the above named facility to be in compliance with applicable statutes, ordinances and regulations. Therefore, a Regular License is enclosed.

Thank you for your continued effort to provide quality older adult daily living services. If you have questions, please contact me at (717) 214-6716.

Sincerely,

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

Kevin Longenecker
Director

Enclosures

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF AGING

LICENSE

This license is hereby granted to WAYNESBURG ADULT DAY CARE, INC.
LEGAL ENTITY

To operate SENIORCARE GREENE
(NAME OF CENTER)

Located at 55 SUGAR RUN ROAD, SUITE 104 WAYNESBURG, PA 15370
(COMPLETE ADDRESS OF CENTER)

To provide older adult daily living services.

The total number of persons which may be served at one time may not exceed 42
(MAXIMUM CAPACITY)

Restrictions: _____

This license is granted in accordance with the Act of July 11, 1990 (P.L. 499, No. 118) and Regulations.

TITLE 6. PA CODE. CHAP. 11. OLDER ADULT DAILY LIVING CENTER Dated July 03, 1993
(NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from June 01, 2014 until May 31, 2015

unless sooner revoked for non-compliance with applicable laws and regulations.

No: 084950 - Regular



ISSUING OFFICER

NOTE: This license is issued for the above address only and is not transferable. This license should be posted in a conspicuous place in the center.

Issued On: May 22, 2014

AGL01

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER LICENSE NUMBER: 084950	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/20/2014
NAME OF PROVIDER OR SUPPLIER SeniorCARE Greene		STREET ADDRESS, CITY, STATE, ZIP CODE 55 SUGAR RUN ROAD, SUITE 104 WAYNESBURG, PA 15370		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
1 000	Initial Comments COMPLIANCE A State licensure inspection was completed on 03/20/14. It was determined that SeniorCare Greene was in compliance with the requirements of 6 PA Code, Chapter 11, Older Adult Daily Living Centers Regulations.	1 000		

AUTHORIZED PROVIDER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

DEPARTMENT OF AGING APPROVAL

DATE