



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFICATE OF COMPLIANCE**

This certificate is hereby granted to SIMPSON MEADOWS  
LEGAL ENTITY

To operate SIMPSON MEADOWS  
NAME OF FACILITY OR AGENCY

Located at 101 PLAZA DRIVE, DOWNINGTOWN, PA 19335  
(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 \_\_\_\_\_ ADDRESS OF SATELLITE SITE

To provide Assisted Living-Special Care  
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 81  
(MAXIMUM CAPACITY)  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

**Special Care Unit - 55 Pa.Code §§ 2800.231-239 - Capacity 18**

Restrictions: \_\_\_\_\_

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2800: Assisted Living Residences  
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from March 1, 2017 until March 1, 2018,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **141180**

Robert E. Robinson  
ISSUING OFFICER

Jay Bank  
DIRECTOR

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



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NOV 8 2016

Ms. Gail Dooley, Administrator Assisted Living  
Simpson Meadows  
101 Plaza Drive  
Downingtown, Pennsylvania 19335

RE: Simpson Meadows  
Certificate #: 141180

Dear Ms. Dooley:

The Department has received your November 17, 2016 renewal application to operate the above Assisted Living Home pursuant to Title 55, PA Code, Chapter 2800. A regular license is being issued in response to your application. Your license is enclosed.

Please be advised that, pursuant to 55 Pa.Code § 20.31 (relating to annual inspection), the Department is required to conduct an onsite inspection of the above Assisted Living Home at least once every twelve months. The Department will conduct an inspection of Simpson Meadows within the next twelve months. If evidence of noncompliance with Title 55, PA Code, Chapter 2800 is found during the inspection, the Department will take appropriate enforcement action.

If you have any questions about the Department's revised process, please contact the Bureau of Human Services Licensing's Provider Support Hotline at 1-866-503-3926 or by electronic mail at [ra-pwarlheadquarters@state.pa.us](mailto:ra-pwarlheadquarters@state.pa.us).

Sincerely,

A handwritten signature in black ink, appearing to read "J. Rowe".

Jacqueline L. Rowe  
Director

Enclosure  
License