

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF HUMAN SERVICES



CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to UPMC SENIOR COMM	UNITIES		
	LEGALERIST		
To operate STRABANE WOODS OF WASHINGTON	OF FACILITY OR AGENCY) ************************************
Located at 319 WELLNESS WAY, WASHINGTON, PA 15301 (COMPLETE A	ADDRESS OF FACILITY OR AC	SENCY)	
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ADDRESS OF SATELLITE SITE		ADDRESS OF SATELLITE SITE	
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To provide Assisted Living			THE ROTH STREET STR
TYPE OF SERVICE(S) TO BE			
The total number of persons which may be cared for at one time may no	ot exceed 100	·	·
or the maximum capacity permitted by the Certificate of Occupancy, wh	richever is small	er. (MAXIMUM CAPACITY)	
Restrictions:			
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This certificate is granted in accordance with the Human Services Code	e of 1967, P.L. 3	1, as amended, and Regulations	
55 Pa.Code Chapter 2800: Assisted Living Residences	LE OF REGULATIONS)		······································
and shall remain in effect from January 28,	2020	until January 28,	2021
unless sooner revoked for non-compliance with applicable laws and rec		ului January 20,	
unless sooner revoked for non-compliance with applicable laws and reg	juiations.		
No: 445420			
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ISSUING OFFICER		Deputy Secretary	chtertalabethteurheurheurheitstelleurum fichtig
		rectors accessors	

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



NOV 1 9 2019

Ms. Doreen Diesel, RN Administrator UPMC Senior Communities 319 Wellness Way Washington, Pennsylvania 15301

RE: Strabane Woods of Washington

Certificate #: 445420

Dear Ms. Diesel:

The Department has received your October 24, 2019 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 Strabane Woods of Washington 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 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.

Sincerely,

Kevin Hancock Deputy Secretary

Office of Long-term Living

Enclosure License