

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF HUMAN SERVICES



CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to UPMC SENIOR COMMUNITIES		
To operate STRABANE WOODS OF WASHINGTO	LEGAL ENTITY	
NAME OF FACILITY OR AGENCY		
Located at _319 WELLNESS WAY, WASHINGTON, PA 15301		
	PLETE 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	
ADDRESS OF SATELLITE SITE	ADDRESS OF SKIELLIE SITE	
To provide Assisted Living		
TYPE OF SERVICE(S	-, -	
The total number of persons which may be cared for at one time ma	ay not exceed 100	
or the maximum capacity permitted by the Certificate of Occupancy	w, whichever is smaller.	
Destrictions		
Restrictions:		
This certificate is granted in accordance with the Human Services C	Code of 1967, P.L. 31, as amended, and Regulations	
55 D. C. L. Cl. (4. A000 A. 14. LT. 1. D. 1.1		
55 Pa.Code Chapter 2800: Assisted Living Residences (MANUAL NUMBER AI	ND TITLE OF REGULATIONS)	
and shall remain in effect from January 28,	2021 until January 28,	2022
unless sooner revoked for non-compliance with applicable laws and		,
No: 445420		
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Moven C. noverson	Game F. Buchena Deputy Secretary	ues
1920 LING OFFICER	Deputy Secretary	

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.



November 10, 2020

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 2, 2020 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,

Jamie L. Buchenauer Deputy Secretary

Office of Long-Term Living

Jamie f. Buchenaues

Enclosure License