

## CERTIFIED MAIL – RETURN RECEIPT REQUESTED MAILING DATE: May 11, 2021

Mr. Samuel Feuer Manager Wyndmoor Assisted Living Company, LLC 551 East Evergreen Avenue Wyndmoor, Pennsylvania 19038

> RE: Springfield Senior Living Community License #: 144841

Dear Mr. Feuer:

On March 9, 2021, the Department of Human Services (Department) issued a notice of its intent to assess a fine for regulatory violations with 55 Pa.Code Ch. 2600 (relating to personal care homes) for the above personal care home.

Pursuant to 62 P.S. §§ 1085-1087 and 55 Pa.Code §§ 2600.261-268 (relating to enforcement), the Department hereby assesses a fine for the following uncorrected violations.

55 Pa.Code Chapter 2600 <u>Section no.</u>	of		Fine Per resident X Per day	Calculated Fine = Per day	Initial Fine Assessment_
187d	П	41	\$5	\$205	<u>\$3,280</u>

Total Fine Assessment for period March 10, 2021 through March 25, 2021 = \$3,280.

The enclosed Invoice for Personal Care Home Fine specifies the total amount of the fines for the period following the Department's notice of intent to assess a fine. The invoice is payable within 30 days from the mailing date of this letter. The fines will continue to accumulate and will be recalculated at the end of each month until all violations are fully corrected. You must notify the Department's Regional Human Services Licensing office in writing as soon as each violation is fully corrected and submit written documentation of each correction. Even if you pay the full amount of this invoice, fines will continue to accumulate for each violation until you have provided written notice of full correction and the Department has verified that the violations are fully corrected.

In accordance with §2600.268 (relating to notice of violations), the personal care home administrator shall immediately post this written notice in a conspicuous and public place in the home, if this notice includes a Class I violation.

If you disagree with the decision to assess a fine, you have the right to appeal through hearing before the Bureau of Hearings and Appeals, Department of Human Services in accordance with 1 Pa.Code Part II, Chs. 31-35 and 62 P.S. §1086(f). If you decide to appeal, a written request for an appeal with a check made payable to the "Commonwealth of Pennsylvania" for the total monthly fine amount or \$500, whichever is less, must be received within 30 days of the mailing date of this letter by:

> Shivani Patel, Enforcement Manager Bureau of Human Services Licensing Department of Human Services Room 631, Health and Welfare Building 625 Forster Street Harrisburg, Pennsylvania 17120

This decision to assess a fine is final 31 days from the date of this letter, or if you decide to appeal, upon issuance of a decision by the Bureau of Hearings and Appeals.

If you have any questions regarding this invoice please contact Shivani Patel, Human Services Licensing, at 717-783-3670.

Sincerely,

Jeanne Parisi

Jeanne Parisi Director

Enclosure Personal Care Home Fine Invoice

bc: Patricia Adams, Human Services Licensing Shivani Patel, Human Services Licensing

## **Personal Care Home Invoice**

Bureau of Hum Room 631, Hea 625 Forster Str Harrisburg, Per	t of Human Services lan Services Licensing alth and Welfare Building reet nnsylvania 17120 3-3670 Fax: 717-783-5662			<b>Invoice Date</b> : 5	6000421 5/11/2021 6/11/2021	
Bill To:						
551 East Eve	ssisted Living Company, LLC rgreen Avenue ennsylvania 19038	;	Re: Springfield Senior Living Community 551 East Evergreen Avenue Wyndmoor, Pa 19038			
Contact Name				License Number	14484	
Fine/Appeal	Description - 55 Pa.Code § 26	00 From:	To:	Fine Imposed	Line Total	
Class II	187d	3/10/2021	3/25/2021	\$3,280.00	\$3,280.00	
				Invoice Total	\$3,280.00	
	Please remit this po	ortion with paymer	nt to ensure proper cre	edit		
Wyndmoor Assisted Living Company, LLC 551 East Evergreen Avenue Wyndmoor, Pennsylvania 19038				<b>Assessmen</b> t	#: S000421	
vv ynamoor, r				Invoice Da	-	
5	pringfield Senior Living Com 51 East Evergreen Avenue Vyndmoor, Pa 19038	munity		Due Da	<b>te:</b> 6/11/2021	
Please make checks payable to: Commonwealth of Pennsylvania Bureau of Human Services Licensing				Total Due	\$3,280.00	
Room 631, Health & 625 Forster Stre Harrisburg, PA 17			Payment Enclose			

cc: file - Open Fines