

Department of Human Services  
Bureau of Human Service Licensing  
**LICENSING INSPECTION SUMMARY - PUBLIC**

September 23, 2026

[REDACTED]  
DUNWOODY VILLAGE INC

[REDACTED]  
ATTN:PERSONAL CARE SERVICES  
[REDACTED]

RE: DUNWOODY VILLAGE  
3500 WEST CHESTER PIKE  
NEWTOWN SQUARE, PA, 19073  
LICENSE/COC#: 14525

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/20/2026 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,

[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

## Facility Information

Name: DUNWOODY VILLAGE License #: 14525 License Expiration: 12/22/2026  
Address: 3500 WEST CHESTER PIKE, NEWTOWN SQUARE, PA 19073  
County: DELAWARE Region: SOUTHEAST

## Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

## Legal Entity

Name: DUNWOODY VILLAGE INC  
Address: [REDACTED]  
Phone: [REDACTED] Email: [REDACTED]

## Certificate(s) of Occupancy

Type: C-2 LP Date: 02/21/2002 Issued By: CWOPA - L&I

## Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 97 Waking Staff: 73

## Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:  
Reason: Incident Exit Conference Date: 08/27/2026

## Inspection Dates and Department Representative

07/20/2026 - On-Site: [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

License Capacity: 81 Residents Served: 77

## Secured Dementia Care Unit

In Home: Yes Area: Dementia Unit Capacity: 20 Residents Served: 17

## Hospice

Current Residents: 0

## Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 77  
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
Have Mobility Need: 20 Have Physical Disability: 0

## Inspections / Reviews

## 07/20/2026 Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 09/13/2026

## 09/17/2026 - POC Submission

Submitted By: [REDACTED] Date Submitted: 09/20/2026  
Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 09/20/2026

Inspections / Reviews *(continued)*

09/23/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/20/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

## 17 Record Confidentiality

### 1. Requirements

2600.

17. Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

### Description of Violation

On [REDACTED], the door of the medication station on the Memory Care unit was open. The controlled substance book that contained the residents' information was unlocked, unattended, and accessible on top of a desk.

### Plan of Correction

Accept [REDACTED] - 09/17/2026)

The door to the nursing station was immediately closed on 7/20/2026. The nurse on duty inadvertently left the door open when running to help a resident who was a high fall risk in the dining room. Immediate education was provided to the nurse on duty by Dorene VanLuvender, Director of Personal Care, and the narcotic book was placed in the medication cart. On September 2nd & 3rd, 2026, education was provided to nursing staff regarding consistently placing the narcotic binder in a medication cart drawer when not in use. Beginning the week of 9/7/2026, the Director of Personal Care, or designee, will ensure the narcotic binders are kept in a drawer of the medication cart when not in use on a weekly basis for 3 months then monthly ongoing. The results of the checks performed by the Director of Personal Care, or designee, will be documented in an audit log.

Licensee's Proposed Overall Completion Date: 09/14/2026

Implemented [REDACTED] - 09/23/2026)

## 105g Lint Removal and Duct Cleaning

### 2. Requirements

2600.

- 105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

### Description of Violation

On [REDACTED], there was a large accumulation of lint in the lint trap of the main laundry dryer. There were no clothes in the dryer at the time.

### Plan of Correction

Accept [REDACTED] - 09/17/2026)

Education will be provided to both nursing and EVS staff by 9/18/2026 regarding cleaning the lint traps after each use on all dryers. Signs will be posted at each dryer to 'Remove lint after every cycle' by 9/14/26. Sign-out sheets for the commercial dryer will be updated by 9/18/26 to show the lint trap is emptied after each use and will be initialed by EVS staff when the task is performed. The Director of Personal Care, or designee, will review the sign-out sheets weekly for 3 months then monthly ongoing to ensure that the traps are being emptied after each use. The Director of Personal Care, or designee, will also spot check the lint traps weekly for 3 months then monthly ongoing to ensure the lint trap is empty. The Director of Personal Care, or designee, will keep a log of the lint trap checks and review

**105g Lint Removal and Duct Cleaning (continued)**

*of the sign out sheets beginning the week of 9/14/2026.*

**Licensee's Proposed Overall Completion Date:** 09/18/2026

**Implemented** [REDACTED] - 09/23/2026)