



Department
of Health

CONSUMER SUMMARY

Facility Posting

Instructions: Please complete the information in the FACILITY RESPONSE table.

FACILITY RESPONSE

Facility Operating Certificate Name	<i>Wheatfield 500-E-014</i>
Full Address	<i>3920 Forest Parkway North Tonawanda, NY 14120</i>
Website link Facility	https://www.depaul.org/locations/wheatfield/
Website link DOH	https://www.health.ny.gov/
Starting rent for each license and certification	<i>ALR ranges from \$5430-5930 per month private depending on the model of the room, range for Semi-private is \$3215-3430 depending on model SNALR \$7010 per month private, \$5,215 Semi-private</i>
Summary of Services (consistent language)	Spacious, furnished private and semi-private bedrooms with private bathrooms Nutritious, appetizing meals approved by a registered dietitian 24-hour access to staff Assistance with the activities of daily living, as needed Physician and podiatry services available on site, if preferred Convenient pharmacy delivery service Assistance with medication management Secure personal spending account available Housekeeping, personal laundry and linen service Emergency call system Pet-friendly community Non-smoking community
Cost for Additional Services – Tier billing or other	<i>N/A</i>