

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to WATERMARK OPERATOR, LLC

LEGAL ENTITY

To operate BLUE BELL PLACE

NAME OF FACILITY OR AGENCY

Located at 777 DEKALB PIKE, BLUE BELL, PA 19422

(COMPLETE 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

To provide Personal Care Homes

TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 99  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 30

This certificate is granted in accordance with the Public Welfare Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes

(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from April 20, 2010 until April 20, 2011,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 132800

*Robert E. Robinson*

ISSUING OFFICER

*Kevin T. Casey*

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.

PW 628 - 4/02



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE  
PO BOX 2675  
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

APR 21 2010

PHONE: (717) 783-3670  
FAX: (717) 783-5662

Mr. David Barnes, Authorized Agent  
Watermark Operator, LLC  
2020 West Rudasill Road  
Tucson, Arizona 85704

RE: Blue Bell Place  
777 DeKalb Pike  
Blue Bell, Pennsylvania 19422

Dear Mr. Barnes:

As a result of the Department of Public Welfare's licensing inspection on January 19, 2010 and January 20, 2010, and the corrections you have made after our inspection, we have found the above personal care home to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes). Therefore, a regular license is being issued. Your license is enclosed.

Sincerely,

A handwritten signature in cursive script that reads "Kevin T. Casey".

Kevin T. Casey  
Deputy Secretary

Enclosure  
License

**VIOLATION REPORT  
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

NAME AND ADDRESS OF PERSONAL CARE HOME Blue Bell Place 777 DeKalb Pike, Blue Bell, PA 19422		CURRENT LICENSE NUMBER 132800	
INSPECTION DATES 01/19-01/20/2010		REGIONAL REPRESENTATIVE Sanford Stone, Paul Metzger	
SIGNATURE OF LEGAL ENTITY <i>Kathleen Wise, Executive Director</i>	DATE 2.4.2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Jim Hawley</i>	DATE 4-14-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
<p>22a1, 224a 22a1 The following admission document shall be completed for each resident - Preadmission screening completed prior to admission on a form specified by the Department.</p> <p>224a A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.</p>	<p>Resident #1 was admitted to the home on 05/14/2009. A copy of the pre-admission screening document was not on file in the resident's record.</p>	<p>2.4.2010</p>	<p>Pre-Admission Screening was completed on 2.4.2010 for Resident #1 Moving forward all Admissions will have a pre-Admission screening completed within 30 Days prior to admission The Administrator or designated Personal Care Home staff member will complete the forms. The Forms will be kept in the Resident Record and additional copy will be kept in a separate file as well. Administrator has initiated a new policy to assure on-going compliance with this Regulation</p>	<p>4-14-10 <i>JH</i></p>

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<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Blue Bell Place 777 DeKalb Pike, Blue Bell, PA 19422		<b>CURRENT LICENSE NUMBER</b> 132800	
<b>INSPECTION DATES</b> 01/19-01/20/2010		<b>REGIONAL REPRESENTATIVE</b> Sanford Stone, Paul Metzger	
<b>SIGNATURE OF LEGAL ENTITY</b> <i>Kathleen Wolf, Executive Director</i>	<b>DATE</b> 2.4.2010	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> <i>Jason Harvey</i>	<b>DATE</b> 4-14-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
89b Hot water temperature in areas accessible to the resident may not exceed 120°F.	Hot water temperature at the sink in the first floor bathroom next to the elevator measured 124.5°F.	2.4.2010	The Hot water temperature was adjusted on the day of inspection. Moving forward the temperatures of the Hot water will be taken three times per week at different locations. Any time the Hot water temperature exceeds 120°F The Maintenance supervisor will be notified and the mixing valves will be adjusted until the temperature is within acceptable limits. Temperature logs will be maintained in maintenance office to assure ongoing compliance.	4-14-10 <i>JA</i>

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**PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

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<b>INSPECTION DATES</b> 01/19-01/20/2010		<b>REGIONAL REPRESENTATIVE</b> Sanford Stone, Paul Metzger	
<b>SIGNATURE OF LEGAL ENTITY</b> <i>Kathleen Wade, Executive Director</i>	<b>DATE</b> 2.4.2010	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> <i>Jason Hammer</i>	<b>DATE</b> 4-14-10

1	2	3	4	5
REGULATION 55 Pa.Code § 2600.	VIOLATION/CLASS	DATE BY WHICH CORRECTION WILL BE COMPLETED	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY DPW
132b A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.	The home had not had a fire drill conducted by a fire safety expert annually.	2.23.10	Fire Drill has been scheduled with Whitpain Township Fire Marshal. The Drill is scheduled for 2.23.10. A Drill will be scheduled with the Fire Marshal annually to assure ongoing compliance with this Regulation.	4-14-10 <i>JK</i>

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PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

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INSPECTION DATES .01/19-01/20/2010		REGIONAL REPRESENTATIVE Sanford Stone, Paul Metzger	
SIGNATURE OF LEGAL ENTITY <i>Kathleen Weber</i>	DATE 2/4/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Jason Bauer</i>	DATE 4-14-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
184a The original container for prescription medications shall be labeled with a pharmacy label that includes the following:  (1) The resident's name. (2) The name of the medication. (3) The date the prescription was issued. (4) The prescribed dosage and instructions for administration. (5) The name and title of the prescriber.	The pharmacy label for resident #2 for Dorzolamide/Timolol did not have the correct dosage. The correct dosage is 1 drop in left eye 2 times daily as written from a 06/10/2008 order while the pharmacy label says 1 drop in left eye 1 time daily.	2.4.2010  <i>Emergency</i>	A New prescription was obtained for Resident #2 for the medication. To assure ongoing compliance with this regulation the current Policy for Prescription Medication Labels has been updated to include a change of dosage. New Policy requires a new prescription for dosage changes. The Home conducts monthly recaps of all medications for compliance. <i>JH.</i>	4-14-10 <i>JH</i>



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INSPECTION DATES 01/19-01/20/2010		REGIONAL REPRESENTATIVE Sanford Stone, Paul Metzger	
SIGNATURE OF LEGAL ENTITY <i>Kaitlen Woi</i>	DATE <i>2.4.10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Jamie Harvey</i>	DATE <i>2-7-10</i>

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
202 The following procedures are prohibited:  (5) A mechanical restraint, defined as a device that restricts the movement or function of a resident or portion of a resident's body, is prohibited.	The door at the service exit from the kitchen area has a magnetic locking system that prohibits immediate egress form the building. This exit is not part of the home's secure dementia care unit.	<i>2.3.10</i>	Service exit door has been serviced and the Keypad locking device has been disconnected from the inside of this Door. Moving forward Keypad Locking Devices will not be placed on any doors that are not located in the secured dementia unit.	<i>4-14-10 JK</i>

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PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

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INSPECTION DATES 01/19-01/20/2010		REGIONAL REPRESENTATIVE Sanford Stone, Paul Metzger	
SIGNATURE OF LEGAL ENTITY <i>Kathleen Weir</i>	DATE 2.4.10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Jon Hammy</i>	DATE 4-24-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
233c If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.	The code (directions) to unlock the courtyard gate in the secure dementia care unit was not posted near the gate.	1.20.10	Keycode was placed on the gate the day of inspection. During Routine Rounds Maintenance Director will inspect all doors in secured dementia unit with key pad locking device/magnetic locks and assure code is posted for immediate exit. to assure on going compliance with this regulation.	4-14-10 <i>JK</i>