



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: December 11, 2012

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 September 18, 2012 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.



Sincerely,

A handwritten signature in black ink that reads "Chevon Miller".

Chevon Miller
Regional Licensing Administrator

Enclosure(s)

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

PCH Name: BLUE BELL PLACE		License Number: 132800
Address: 777 DEKALB PIKE, BLUE BELL, PA 19422		County: Montgomery
Administrator: Tom Schultz		Region: SOUTHEAST
Legal Entity Name: WATERMARK OPERATOR LLC		
Legal Entity Address: 2020 WEST RUDASILL ROAD, TUCSON, AZ 85704		
Certificate(s) of Occupancy		
Staffing Hours		
Resident Support:	Total Daily Staff: 110	Waking Staff: 83
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Complaint		
On-Site Inspections Dates and Department Representatives On-Site		
09/18/2012: McHale, Christine; Sledge, Andrea		
Off-Site Inspection Dates and Inspectors, If Applicable		
Other Details		
Partial or Full Triggers:	Random Indicators:	
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 99 Number of Resident(s) Served: 76 Secured Dementia Care Unit In Home: Yes Area: Secured Dementia Unit Capacity, If Applicable: 30 	Number of Residents who: 	

Violation Report: 13280 - 09/18/2012 - McHale, Christine
PCH Name: BLUE BELL PLACE

1. REGULATION 55 Pa.Code §2600

2600.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

2a. DESCRIPTION OF VIOLATION

On 9/13/12, an allegation of abuse against resident #1 was reported to staff person A. The home did not submit an Act 13 report to the local area agency on aging until 9/18/12.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

1. ACT 13 reporting will be completed & sent with reports of abuse.
2. An inservice was held with the executive director and state compliance director on the proper procedures for completing abuse reports. (see attached).
3. To assure ongoing compliance with this regulation all reportable incidents will be reviewed by managing director, state compliance director or regional director of health services prior to being sent.

Repeat Violation: Yes

Date(s) of Previous Violation(s): 08/14/2012

Signature of Legal Entity Representative
(Required on EVERY Page)

Thomas P. Schultz

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

THOMAS P. SCHULTZ, EXEC. DIR

Date

11 27 12

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of

11/29/12
(Date)

Plan of correction implementation status as of

11/29/12
(Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by

CRM
(Initials)