



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: February 12, 2013

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

RE: Rose Tree Place
500 Sandy Bank Road
Media, Pennsylvania 19063

Dear Mr. Barnes:

As a result of the Department of Public Welfare's licensing inspection on December 13, 2012 and January 9, 2013 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.

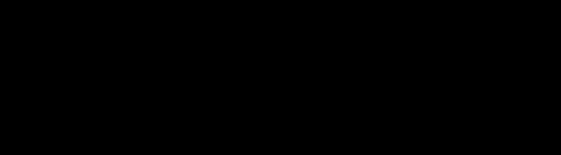
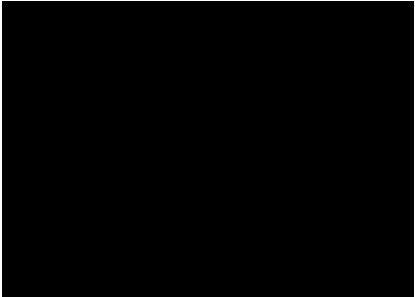
Sincerely,

A handwritten signature in black ink that reads "Roslyn Brewer". The signature is written in a cursive, flowing style.

Roslyn Brewer
Regional Licensing Administrator

Enclosure(s)

VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2800

PGH Name: ROSE TREE PLACE		License Number: 192810
Address: 600 SANDY BANK ROAD, MEDIA, PA 19063		County: Delaware
Administrator: Timothy Bailla		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: 147	Working Staff: 110
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 12/13/2012: Adams, Patricia; Sledge, Andrea		
Off-Site Inspection Dates and Inspectors, if Applicable 01/09/2013: Adams, Patricia		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 149 Number of Residents Served: 110 Secured Dementia Care Unit in Home: Yes Area: Secured Dementia Unit Capacity, if Applicable: 20 	Number of Residents who: 	

Violation Report: 13281 - 12/04/2012 - Adams, Patricia
 FCH Name: ROSE TREE PLACE

1. REGULATION 55 Pa.Code §2800
 2800.183(d) - Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home

2a. DESCRIPTION OF VIOLATION

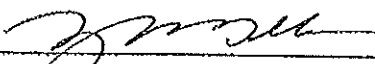
On 12/13/12, resident #1's medications and locking storage area were reviewed and inspected after a reported incident involving missing medications. The locked storage area, in the resident's shared room, contained resident #1's medications for self administration as well as a vial of Tramadol HCL Acetaminophen, prescribed for resident #2. Resident #2 does not self administer medication. The medication was not listed as current medication on resident #2's December medication administration record.

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.


The Medication that was found was an old prescription. Residents [redacted] in the past administered medications to [redacted], prior to living At Rose Tree Place. The medication was removed on 12/13/12. Resident #1 no longer self administers [redacted] medication. Resident #1 has been informed that medications can not be kept in [redacted] Room. To assure on going compliance Rose Tree Place will now oversee medication Administration for Resident #1 and #2. The administrator/designee will review all resident medication administration needs on a monthly basis beginning 3/1/13 (SW)

Repeat Violation: No.	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) 

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Timothy Ballas	Date 1/22/13
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>1/28/13</u> (Date)	Plan of correction implementation status as of <u>1/28/13</u> (Date)
The above plan of correction was approved by  (Initials)	<input type="checkbox"/> Fully Implemented
	<input checked="" type="checkbox"/> Partially Implemented - Adequate Progress
	<input type="checkbox"/> Partially Implemented - Inadequate Progress
	<input type="checkbox"/> Not Implemented