



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

OCT 12 2016

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  
License #: 132800

Dear Mr. Barnes:

As a result of the Department of Human Services' annual licensing inspection on July 6, 2016 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in cursive script that reads "J. Rowe".

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary

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

PCH Name: BLUE BELL PLACE		License Number: 13280
Address: 777 DEKALB PIKE, BLUE BELL, PA 19422		County: Montgomery
Administrator: Rebecca Hamilton		Region: SOUTHEAST
Legal Entity Name: WATERMARK OPERATOR LLC		
Legal Entity Address: 2020 WEST RUDASILL ROAD, TUCSON, AZ 85704		
<b>Certificate(s) of Occupancy</b> C-2 LP 10/16/2000 Commonwealth of PA L&I		
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 99	Waking Staff: 74
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
<b>Reason(s) for inspection(s)</b>		
Renewal		
<b>On-Site Inspections Dates and Department Representatives On-Site</b>		
07/06/2016: Gray, Dean; Freeman, Sabrina		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
<b>Other Details</b>		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 99 Number of Residents Served: 73 Secured Dementia Care Unit In Home: Yes Area: The Gardens Secured Dementia Unit Capacity, if Applicable: 30 Number of Residents Served in Secured Dementia Care Unit, if applicable: 26 Number of Current Hospice Residents: 8 Number of Hospice Residents in past year: 17	<b>Number of Residents who:</b> Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 73 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 26 Have a Physical Disability: 0	

Violation Report: 13280 - 07/06/2016 - Gray, Dean  
 PCH Name: BLUE BELL PLACE

1. REGULATION 55 Pa.Code §2600  
 2600.85(d) - Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

2a. DESCRIPTION OF VIOLATION  
 Two trash cans located in the kitchen did not have lids.

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.

Per regulation 85D RCG Discussion: Lids may be removed from trash receptacles in kitchen area when they are actively in use, such as during clean up or food preparation. Community Breakfast meal services is schedule from 8 a.m. thru 9:30 a.m ( residents may be in dining room when provided late service thru 10:00 to complete the meal.) Inspection of the dining/kitchen area was completed at approximately 10:15 a.m. in which 2 of the 4 trash can lids were removed related to active use of meal/service clean up.

Plan of Correction	Date by Which Correction will be completed
Trash Receptacles lids were put in place at end of service/clean up.	7-6-16
The DSD or designee will ensure that all trash Receptacle lids are on the receptacles when not in use For clean up or food preparation.	7-6-16 and ongoing
DSD or designee will make random daily checks to ensure all trash receptacle lids are in place when not in use for clean up or food preparation.	7-6-16 and ongoing

Repeat Violation: No      Date(s) of Previous Violation(s):


Signature of Legal Entity Representative (Required on EVERY Page) 

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Rebecca Hamber EIT*      Date *8/25/16*

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

The above plan of correction is approved as of 8/31/16 (Date)

Plan of correction implementation status as of 8/31/16 (Date)

The above plan of correction was approved by  (Initials)

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

Violation Report: 13280 - 07/06/2016 - Gray, Dean  
 PCH Name: BLUE BELL PLACE

1. REGULATION 55 Pa.Code §2600  
 2600.103(e) - Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

2a. DESCRIPTION OF VIOLATION

The walk-in refrigerator had packages of unlabeled and not dated deli meats.

The walk in freezer had an open bag of corn and an open bag of fish sticks without a label or date.

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.*

Plan of Correction

Date by Which Correction will be completed

The undated deli meat was discarded at time of inspection  
 By the Dining Service Director (DSD)

7-6-16

The DSD or designee will complete weekly inspections  
 To ensure all food is dated and labeled.

7-6-16 and ongoing

ED or designee will make random weekly inspections to ensure  
 that all food stored is dated and labeled.

7-6-16 and ongoing

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)



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

Rebecca Hamilton

Date

8/25/16

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Violation Report: 13280 - 07/06/2016 - Gray, Dean  
 PCH Name: BLUE BELL PLACE

1. REGULATION 56 Pa.Code §2600  
 2600.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.

2a. DESCRIPTION OF VIOLATION  
 The fire drill conducted on 6/23/16 took 14 minutes and 40 seconds. This exceeds the maximum evacuation time of 12 minutes as determined by the home's fire safety expert.

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

*inc/* Fire Drill conducted on 6-23-16 exceeded 12 minute fire expert Safety recommendations by 2 min 40 seconds as *noted*  
*lmr* a result of fire system on test per sprinkler head repair. Sprinkler head repair completed by Allegiant Fire Protection. They were in house at approximately 11:15 p.m. Community had reported the system being on test to monitoring agents and community associates. (Instruction provides community associates with awareness that the system may sound, however the sound would be a result of testing. Simultaneously the Fire drill monitoring company, whom provides random fire drills to community arrived to complete an unannounced fire drill at 11:35 p.m. As a result of communication of the system being on test and system may sound, associates deemed the fire alarm as part of the testing.

Repeat unannounced fire drill was completed again on 6-25-16 at 11:17 p.m. meeting and exceeding the fire safety expert's recommendations. Evacuation time of the fire drill was 5 min 24 seconds.

Plan of Correction	Date by Which Correction will be completed
Repeat fire drill was completed on 6-25-16 at 11:15 p.m. with evacuation time of 5 min 24 seconds.	6-25-16
Maintenance Director and or designee will continue to provide Fire safety training to all associates with refresher for fire safety to be completed to all associates.	9-21-16
Fire Drill monitoring company will continue random monthly fire drills to ensure the community is able to evacuate to fire safe areas per fire expert recommendations.	6-25-16 and on going

Repeat Violation: No      Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page) *Rebecca Hamilton*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Rebecca Hamilton*      Date *8/25/16*

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Violation Report: 13280 - 07/06/2016 - Gray, Dean  
 PCH Name: BLUE BELL PLACE

**1. REGULATION 65 Pa.Code §2600**  
 2600.224(a) - 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.

**2a. DESCRIPTION OF VIOLATION**

The pre-admission screening form for resident #1, admitted [redacted] 16, does not include a determination that the home can meet the service needs of the resident or that the resident can safely use and avoid poisonous materials.

**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.

**Plan of Correction**

**Date by Which Correction will be completed**

The preadmission screening form for resident #1 was reviewed and updated to include checking the box stating the home can meet the service needs of the resident or that the resident can safely use and avoid poisonous materials.

7-6-16

The Health and Wellness Nurse or designee will complete the preadmission Form at time of prescreen to include checking the box stating the home can meet the service needs of the resident or that the resident can safely use and avoid poisonous materials.

7-6-16 and ongoing

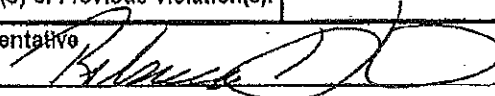
ED or designee will conduct new admission audits of all new admissions to ensure prescreen form includes checking the box stating the home can meet the service needs of the resident or that the resident can safely use and avoid poisonous materials.

7-15-16 and ongoing

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)



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

Rebecca Hamilton ED

Date

8/25/16

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