



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF HUMAN SERVICES



CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to CSW ARBOUR SQUARE III PLYMOUTH MEETING LP

LEGAL ENTITY

To operate THE PINNACLE AT PLYMOUTH MEETING

NAME OF FACILITY OR AGENCY

Located at 215 PLYMOUTH ROAD, PLYMOUTH MEETING, PA 19462

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

| | |
|--|--|
| <small>ADDRESS OF SATELLITE SITE</small> | <small>ADDRESS OF SATELLITE SITE</small> |
| <small>ADDRESS OF SATELLITE SITE</small> | <small>ADDRESS OF SATELLITE SITE</small> |
| <small>ADDRESS OF SATELLITE SITE</small> | <small>ADDRESS OF SATELLITE SITE</small> |

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 138
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 19

This certificate is granted in accordance with the Human Services 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 October 8, 2020 until October 8, 2021,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **147200**

Robert E. Robinson

ISSUING OFFICER

Jamie J. Buchenauer

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.



pennsylvania

DEPARTMENT OF HUMAN SERVICES

October 8, 2020

Mr. Jason Childers
Executive Vice President
CSW Arbour Square III Plymouth Meeting, LP
1300 Virginia Drive, #215
Fort Washington, Pennsylvania 19034

RE: The Pinnacle at Plymouth Meeting
215 Plymouth Road
Plymouth Meeting, Pennsylvania 19462
License #: 147200

Dear Mr. Childers:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspections on September 17, 2020 of the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because the home is new and not yet serving four or more residents.

In accordance with 55 Pa.Code § 2600.11(b) (relating to procedural requirements for licensure or approval of personal care homes, a re-inspection of your newly licensed facility will be conducted within 3 months of the effective date of this license. Complete compliance with all applicable regulations is required in order to maintain your license.

During the inspection, citations on the enclosed Licensing Inspection Summary were found. All citations specified on the Licensing Inspection Summary must be corrected by the dates specified on the Licensing Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Your NEW license is enclosed, based on substantial but not complete compliance with 55 Pa.Code Ch. 2600.

Sincerely,

Jamie Buchenauer
Deputy Secretary
Office of Long-term Living

Enclosures
License
Licensing Inspection Summary

**Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY**

Facility Information

Name: *The Pinnacle at Plymouth Meeting* License #: *14720* License Expiration Date:
 Address: *215 Plymouth Road, Plymouth Meeting, PA 19462*
 County: *MONTGOMERY* Region: *SOUTHEAST*

Administrator

Name: *Joseph Detzner* Phone: *6102923030* Email:
josephd@merrillgardens.com,

Legal Entity

Name: *CSW Arbour Square III Plymouth Meeting, L.P.*
 Address: *1300 virginia Drive, #215, Fort Washington, Pa, 19034*
 Phone: *503-595-3040* Email: *legal@blueharborsl.com*

Certificate(s) of Occupancy

Type: *I-1* Date: *07/02/2020* Issued By: *Plymouth Township*
 Type: *I-2* Date: *07/02/2020* Issued By: *Plymouth Township*

Staffing Hours

Resident Support Staff: Total Daily Staff: *0* Waking Staff: *0*

Inspection

Type: *Partial* Notice: *Announced* BHA Docket #:
 Reason: *New* Exit Conference Date: *09/17/2020*

Inspection Dates and Department Representative

09/17/2020 - On-Site: Evelyn Perez, Jennie Heinberg

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *138* Residents Served: *0*

Secured Dementia Care Unit

In Home: *Yes* Area: *Garden House* Capacity: *19* Residents Served: *0*

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *0*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

09/17/2020 - Partial

Lead Inspector: *Evelyn Perez*

Follow-Up Type: *POC Submission*

Follow-Up Date: *10/03/2020*

9/28/2020 - POC Submission

Lead Reviewer: *Mia Johnson*

Follow-Up Type: *Document Submission*

Follow-Up Date: *10/01/2020*

10/8/2020 - Document Submission

Lead Reviewer: *Mia Johnson*

Follow-Up Type: *Not Required*

101j2 - Bedroom Chairs (continued)

Description of Violation

Bedroom 111 in the SDCU is to be occupied by 2 residents; however, there is only 1 chair in this room. There is no chairs in any of the PC bedrooms.

Plan of Correction

Accept

- *The PC apartments numbered 105, 111, 201, 202, 212, 214, 215, 223, 224, 229, 230, and 331 all have a bed with a solid foundation and a fire retardant mattress. The shared Garden house apartment (111) that did not have a second chair had one provided by the end of the day of inspection.*
- *Any new residents that come to The Pinnacle that need a bed, fire retardant mattress, a chair, a pillow, bed linens, and blanket. They will also be provided a bedside table, a mirror and an operating lamp.*
- *The General Manager and/or the guest Services Director will assure that all these items are provided at no additional cost to the resident. This will also be checked by the maintenance Director (or Assistant) during the monthly Safety Committee checks.*
- *Date of Completion: September 25, 2020.*

Completion Date: 09/25/2020

Document Submission

Implemented

This violation has been resolved by providing a chair to the above mentioned apartment (This apartment now has 2 chairs) as well as over 10% of the apartments in PC and MC. (See attached photo)

101j3 - Bed/Linens/Pillows/Blankets

1. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

3. Pillows, bed linens and blankets that are clean and in good repair.

Description of Violation

There is no pillows, bed linens and blankets in any of the PC bedrooms.

Plan of Correction

Accept

- *The PC apartments numbered 105, 111, 201, 202, 212, 214, 215, 223, 224, 229, 230, and 331 all have a bed with a solid foundation and a fire retardant mattress.*
- *Any new residents that come to The Pinnacle that need a bed, fire retardant mattress, a chair, a pillow, bed linens, and blanket. They will also be provided a bedside table, a mirror and an operating lamp.*
- *The General Manager and/or the guest Services Director will assure that all these items are provided at no additional cost to the resident. . This will also be checked by the maintenance Director (or Assistant) during the monthly Safety Committee checks.*
- *Date of Completion: September 25, 2020.*

Completion Date: 09/25/2020

Document Submission

Implemented

This violation has been resolved by providing a pillow, linens, and blanket to each furnished apartment. Over 10% of the apartments in PC and MC. are provided with the above mentioned items. (See attached photo)

101j5 - Bedside Table/Shelf

1. Requirements

2600.

- 101.j. Each resident shall have the following in the bedroom:
 - 5. A bedside table or a shelf.

Description of Violation

There is no bedside table or shelf in any of the PC bedrooms.

Plan of Correction

Accept

- *The PC apartments numbered 105, 111, 201, 202, 212, 214, 215, 223, 224, 229, 230, and 331 all have a bed with a solid foundation and a fire retardant mattress.*
- *Any new residents that come to The Pinnacle that need a bed, fire retardant mattress, a chair, a pillow, bed linens, and blanket. They will also be provided a bedside table, a mirror and an operating lamp.*
- *The General Manager and/or the guest Services Director will assure that all these items are provided at no additional cost to the resident. . This will also be checked by the maintenance Director (or Assistant) during the monthly Safety Committee checks.*
- *Date of Completion: September 25, 2020.*

Completion Date: 09/25/2020

Document Submission

Implemented

This violation has been resolved by providing a bed side table to the above mentioned apartment, as well as over 10% of the apartments in PC and MC. (See attached photo)

101j7 - Lighting/Operable Lamp

1. Requirements

2600.

- 101.j. Each resident shall have the following in the bedroom:
 - 7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

There is no lamp or any other source of lighting that can be turned on at bedside in any of the PC bedrooms.

Plan of Correction

Accept

- *The PC apartments numbered 105, 111, 201, 202, 212, 214, 215, 223, 224, 229, 230, and 331 all have a bed with a solid foundation and a fire retardant mattress.*
- *Any new residents that come to The Pinnacle that need a bed, fire retardant mattress, a chair, a pillow, bed linens, and blanket. They will also be provided a bedside table, a mirror and an operating lamp.*
- *The General Manager and/or the guest Services Director will assure that all these items are provided at no additional cost to the resident. This will also be checked by the maintenance Director (or Assistant) during the monthly Safety Committee checks.*
- *Date of Completion: September 25, 2020.*

Completion Date: 09/25/2020

Document Submission

Implemented

This violation has been resolved by providing a bed side lamp to the above mentioned apartment, as well as over 10% of the apartments in PC and MC. (See attached photo)

103f - Refrigerator/Freezer Temps

1. Requirements

2600.

103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

Description of Violation

On 9/17/20, at 10:56 am, the temperature in the dining area freezer was 5 degrees Fahrenheit. There was no thermometer in the Activity's Room refrigerator on the 2nd floor.

Plan of Correction

Accept

- The two items (The dining room freezer and the Activity room refrigerator) mentioned were resolved immediately on the same day of the inspection. The freezer temperature was lowered to 0 degrees and two thermometers were inserted in the activity's refrigerator.
- All other refrigerators/freezers were audited to make sure that there were no other violations.
- The General Manager and/or the Guest Services Director will check this during the routine (Once or twice times per week) walk throughs of the community. This will also be checked by the maintenance Director (or Assistant) during the monthly Safety Committee checks.
- Date of Completion: September 17, 2020

Completion Date: 09/17/2020

Document Submission

Implemented

This violation has been resolved by providing a thermometer in both the refrigerator and freezer compartments. A clip board with a temperature recording sheet has been attached to the side of the unit for daily temperature checks. This violation was resolved immediately upon discovery.

123b - Emergency Procedures Posted

1. Requirements

2600.

123.b. Copies of the emergency procedures as specified in § 2600.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.

Description of Violation

The home's emergency procedures are not posted in a conspicuous and public place in the home.

Plan of Correction

Accept

- The Emergency Procedures Binder was placed at the front desk immediately after it was requested by the inspectors. A framed sign, signifying the location of the binder was also presented at the front desk.
- The General Manager and/or the Guest Services Director will check this during the routine (Once or twice times per week) walk throughs of the community. This will also be checked by the Maintenance Director (or Assistant) during the monthly Safety Committee checks.
- Date of Completion: September 17, 2020

Completion Date: 09/17/2020

Document Submission

Implemented

This violation has been resolved by presenting the following binders at the front desk. 1. Disaster Manual, 2. copy of the PA regulations, 3. Copy of current Plans of Correction. This violation was resolved immediately upon discovery.