

Department of Human Services
Bureau of Human Service Licensing

July 1, 2022

[REDACTED]
WATERMARK OPERATOR LLC
[REDACTED]
[REDACTED]

RE: BLUE BELL PLACE
777 DEKALB PIKE
BLUE BELL, PA, 19422
LICENSE/COC#: 13280

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/14/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
[REDACTED]

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: BLUE BELL PLACE License #: 13280 License Expiration: 09/11/2022
Address: 777 DEKALB PIKE, BLUE BELL, PA 19422
County: MONTGOMERY Region: SOUTHEAST

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: WATERMARK OPERATOR LLC
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Registered Support Staff: 0 Total Daily Staff: 107 Waking Staff: 80

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Incident Exit Conference Date: 06/14/2022

Inspection Dates and Department Representative

06/14/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 99 Residents Served: 70

Secured Dementia Care Unit

In Home: Yes Area: Pathways Capacity: 30 Residents Served: 24

Hospice

Current Residents: 5

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 69
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 1
Have Mobility Need: 37 Have Physical Disability: 2

Inspections / Reviews

06/14/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 06/25/2022

Inspections / Reviews (*continued*)

06/28/2022 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *07/08/2022*

07/01/2022 - Document Submission

Reviewer: [REDACTED] Follow-Up Type: *Not Required*

15b - Supervisor Plan

1. Requirements

2600.

15.b. If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

Description of Violation

On [redacted]/22 the home received an allegation of abuse that mentioned Staff Person A as the perpetrator. The home suspended Staff Person A from [redacted]/22 to [redacted] 22. The home brought Staff Person A back to work on [redacted]/22 with a plan of supervision. The plan of supervision did not include a plan for how Staff Person A would arrive to and depart from the building and the parking lot. The plan did not include a plan for how Staff Person A would move around the building. The Plan was not approved by a representative of the Department.

Plan of Correction

Directed

[redacted] administrator reached out to Regional office on [redacted] [redacted] and again on [redacted] for Plan of Supervision guidance. No response was received. There are no examples or descriptions of what a plan of supervision should entail in the RCG or regulatory website. A plan of supervision was developed to return Staff Person A after no response from regional office and no guidance was provided. [redacted], educated [redacted] on [redacted] 2022. [redacted] understands the missed requirement of addressing how the staff person will be supervised while arriving, departing and walking to [redacted] work location. If a plan of supervision is ever needed in the future all movement by the staff member will be addressed. [redacted] trained [redacted], resident care coordinator and [redacted], program director on June 15, 2022 regarding the requirements of a plan of supervision.

DPOC - [redacted] - 06-28-2022

Administrator will ensure when an abuse complaint is made against a staff member, that individual will be suspended immediately. The home will then have the option to create a plan of supervision that will be submitted to the Department for approval before bringing the staff member back. Management team will be educated on supervision plans within 10 calendar days receipt of this POC. Education will be made available to the Department for review.

Completion Date:

Document Submission

Implemented

[redacted] administrator reached out to Regional office on [redacted] [redacted] and again on [redacted] for Plan of Supervision guidance. No response was received. There are no examples or descriptions of what a plan of supervision should entail in the RCG or regulatory website. A plan of supervision was developed to return Staff Person A after no response from regional office and no guidance was provided. [redacted], educated [redacted] on [redacted] 2022. [redacted] understands the missed requirement of addressing how the staff person will be supervised while arriving, departing and walking to [redacted] work location. If a plan of supervision is ever needed in the future all movement by the staff member will be addressed. [redacted] trained [redacted], resident care coordinator and [redacted], program director on [redacted] 2022 regarding the requirements of a plan of supervision.

DPOC - [redacted] - 06-28-2022

Administrator will ensure when an abuse complaint is made against a staff member, that individual will be suspended immediately. The home will then have the option to create a plan of supervision that will be submitted

15b - Supervisor Plan (continued)

to the Department for approval before bringing the staff member back. Management team will be educated on supervision plans within 10 calendar days receipt of this POC. Education will be made available to the Department for review.

15c - Supervision

1. Requirements

2600.

15.c. The home shall immediately submit to the Department's personal care home regional office a plan of supervision or notice of suspension of the affected staff person.

Description of Violation

On [REDACTED]/22 the home received an allegation of abuse that mentioned Staff Person A as the perpetrator. The home suspended Staff Person A from [REDACTED]/22 to [REDACTED]/22. The home did not submit a plan of supervision to the Department.

Plan of Correction

Directed

[REDACTED], educated [REDACTED] on [REDACTED] 2022. [REDACTED] understands the requirement of immediately submitting to the Department's personal care home regional office a plan of supervision before returning the affected staff person.

[REDACTED] trained [REDACTED], resident care coordinator and [REDACTED], program director on [REDACTED] 2022 regarding the home immediately submitting to the department's personal care home regional office a plan of supervision of the affected person.

DPOC - [REDACTED] - 06-28-2022

Administrator will ensure when an abuse complaint is made against a staff member, that individual will be suspended immediately. The home will then have the option to create a plan of supervision that will be submitted to the Department for approval before bringing the staff member back. Management team will be educated on supervision plans within 10 calendar days receipt of this POC. Education will be made available to the Department for review.

Completion Date:

Document Submission

Implemented

[REDACTED], educated [REDACTED] on [REDACTED]/2022. [REDACTED] understands the requirement of immediately submitting to the Department's personal care home regional office a plan of supervision before returning the affected staff person.

[REDACTED] trained [REDACTED], resident care coordinator and [REDACTED], program director on [REDACTED] 2022 regarding the home immediately submitting to the department's personal care home regional office a plan of supervision of the affected person.

DPOC - [REDACTED] - 06-28-2022

Administrator will ensure when an abuse complaint is made against a staff member, that individual will be suspended immediately. The home will then have the option to create a plan of supervision that will be submitted to the Department for approval before bringing the staff member back. Management team will be educated on supervision plans within 10 calendar days receipt of this POC. Education will be made available to the Department for review.

141a 1-10 Medical Evaluation Information

1. Requirements

141a 1-10 Medical Evaluation Information (continued)

2600.

141.a. A resident shall have a medical evaluation by a physician, physician’s assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:

1. A general physical examination by a physician, physician’s assistant or nurse practitioner.
2. Medical diagnosis including physical or mental disabilities of the resident, if any.
3. Medical information pertinent to diagnosis and treatment in case of an emergency.
4. Special health or dietary needs of the resident.
5. Allergies.
6. Immunization history.
7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
8. Body positioning and movement stimulation for residents, if appropriate.
9. Health status.
10. Mobility assessment, updated annually or at the Department’s request.

Description of Violation

The resident #1's medical evaluation did not include special health or dietary needs of the resident.

Plan of Correction

Accept

The resident care director or program director will audit all new DME's by the 25th of each month for completion. A tracking system is now in place for indicating a review of the DME is needed. The audit results will be presented at our Quality Assurance meeting monthly and the executive director will be responsible for signing off on them.

Completion Date: 06/15/2022

Document Submission

Implemented

he resident care director or program director will audit all new DME's by the 25th of each month for completion. A tracking system is now in place for indicating a review of the DME is needed. The audit results will be presented at our Quality Assurance meeting monthly and the executive director will be responsible for signing off on them.

231b Medical Evaluation

1. Requirements

2600.

231.b. A resident shall have a medical evaluation by a physician, physician s assistant or certified registered nurse practitioner, documented on a form provided by the Department, within 60 days prior to admission. Documentation shall include the resident s diagnosis of Alzheimer s disease or other dementia and the need for the resident to be served in a secured dementia care unit.

Description of Violation

Resident #1 was admitted to the Secure Dementia Care Unit (SDCU) on [REDACTED] 22; however, the resident’s medical evaluation completed on [REDACTED] 22 did not include the need for the resident to be served in a secured dementia care unit..

Plan of Correction

Accept

The resident care director or program director will audit all new DME's by the 25th of each month for completion. The audit results will be presented at our Quality Assurance meeting monthly and the executive director will be responsible for signing off on them.

Completion Date: 06/15/2022

Document Submission

Implemented

The resident care director or program director will audit all new DME's by the 25th of each month for completion. The audit results will be presented at our Quality Assurance meeting monthly and the executive director will be responsible for signing off on them.