

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

December 14, 2023

[REDACTED], OWNER  
BRISTOL HOUSE MEMORY CARE LLC  
[REDACTED]

RE: BRISTOL HOUSE MEMORY CARE  
2527 BRISTOL ROAD  
WARRINGTON, PA, 18976  
LICENSE/COC#: 14458

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/06/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,  
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: BRISTOL HOUSE MEMORY CARE License #: 14458 License Expiration: 04/12/2024  
 Address: 2527 BRISTOL ROAD, WARRINGTON, PA 18976  
 County: BUCKS Region: SOUTHEAST

**Administrator**

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

**Legal Entity**

Name: BRISTOL HOUSE MEMORY CARE LLC  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

**Staffing Hours**

Resident Support Staff: Total Daily Staff: 92 Waking Staff: 69

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #: [REDACTED]  
 Reason: Fine Exit Conference Date: 11/06/2023

**Inspection Dates and Department Representative**

11/06/2023 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 48 Residents Served: 46

Secured Dementia Care Unit  
 In Home: Yes Area: entire home Capacity: 48 Residents Served: 46

Hospice  
 Current Residents: x

Number of Residents Who:  
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 46  
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 46 Have Physical Disability: 0

**Inspections / Reviews**

11/06/2023 Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 11/27/2023

12/01/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: 12/11/2023  
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 12/11/2023

Inspections / Reviews *(continued)*

12/14/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/11/2023

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

## 102h - Toilet Paper

**1. Requirements**

2600.

102.h. Toilet paper shall be provided for every toilet.

**Description of Violation**

On 11/06/2023 around 12:00 PM, there was no toilet paper for the 2 toilets in the bathroom located in the main hallway.

**Plan of Correction**

Accept (████ - 12/01/2023)

The Housekeeper has been retrained and signed new Job Description which highlights specific duties to check all toilet paper holders in main bathrooms 3 - times during an 8hr shift Starting 11/08/2023. Executive Director to check daily behind housekeeper to ensure toilet paper is stored in bathroom for duration of 2-weeks starting 11/08/2023.

Licensee's Proposed Overall Completion Date: 11/27/2023

Implemented (████ - 12/14/2023)

## 141a 1-10 Medical Evaluation Information

**2. Requirements**

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**

Resident #1's medical evaluation dated █████ did not include (7) the ability to self-administer medications.

Resident #2's medical evaluation dated █████ did not included (4) Special health or dietary needs and (6) Immunization history.

Resident #3's medical evaluation dated █████ was checked on None when the resident needed Secured Dementia Care for (4) Special health or dietary needs.

Repeated Violation: 3/21/23, 5/15/23

**Plan of Correction**

Accept (████ - 12/01/2023)

Dementia Care Coordinator has been trained on things to check for on admission for DME upon arrival of resident on 11/09/2023. Director of nursing to check all DME's to ensure DME is correctly filled out upon each admission. Starting on 11/09/2023 for a duration of 2-months, weekly the Executive Director, Dementia Care coordinator and Director of Nursing must randomly audit binders to ensure that DME's and other admission paperwork is filled out properly and fully with nothing left blank that is required.

Licensee's Proposed Overall Completion Date: 11/27/2023

141a 1 10 Medical Evaluation Information *(continued)**Implemented (SW - 12/14/2023)*

## 231b Medical Evaluation

**3. 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 #2 was admitted to the Secured Dementia Care Unit (SDCU) on [REDACTED]; however, the resident's medical evaluation was completed on [REDACTED]*

**Plan of Correction***Accept [REDACTED] - 12/01/2023)*

*Dementia Care Coordinator has been trained on things to check for on admission for DME upon arrival of resident on [REDACTED]. Director of nursing to check all DME's to ensure DME is correctly filled out upon each admission. Starting on 11/09/2023 for a duration of 2-months, weekly the Executive Director, Dementia Care coordinator and Director of Nursing must randomly audit binders to ensure that DME's and other admission paperwork is filled out properly and fully with nothing left blank that is required.*

**Licensee's Proposed Overall Completion Date: 11/27/2023**

*Implemented [REDACTED] - 12/14/2023)*