

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

June 4, 2026

[REDACTED]
BRISTOL HOUSE MEMORY CARE LLC
[REDACTED]

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

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/23/2026 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:** 02/21/2027
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

Type: I 1 **Date:** 03/19/2019 **Issued By:** Warrington Township

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 86 **Waking Staff:** 65

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Monitoring **Exit Conference Date:** 04/23/2026

Inspection Dates and Department Representative

04/23/2026 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information			
License Capacity:	48	Residents Served:	43
Secured Dementia Care Unit			
In Home:	Yes	Area:	Whole Home
Capacity:	48	Residents Served:	43
Hospice			
Current Residents:	5		
Number of Residents Who:			
Receive Supplemental Security Income:	0	Are 60 Years of Age or Older:	42
Diagnosed with Mental Illness:	3	Diagnosed with Intellectual Disability:	0
Have Mobility Need:	43	Have Physical Disability:	0

Inspections / Reviews

04/23/2026 - Partial
Lead Inspector: [REDACTED] **Follow Up Type:** POC Submission **Follow Up Date:** 05/16/2026

Inspections / Reviews (*continued*)

05/12/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/13/2026

Reviewer: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 05/17/2026

05/12/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/13/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 06/01/2026

06/04/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/13/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

51 Criminal Background Check

1. Requirements

2600.

51. Criminal History Checks Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101 10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

Staff Members A, B, and C have not been a residents of Pennsylvania for the past 2 years. The home did not complete an FBI record check for Staff Member A, B, or C.

Repeated Violation: [REDACTED]

Plan of Correction

Accept [REDACTED] - 05/12/2026)

- 1) Staff members A, B, and C were immediately removed from the schedule by ED pending FBI clearance
- 2) All 3 staff members made appts for FBI clearance. Staff members B and C Transferred their ID to PA on 5/12/2026
- 3) Beginning 4/24/2026 BOM will review all new prospective employee applicants for PA residency. An FBI clearance will be performed for any prospective employee or contracted staff member that performs unsupervised duties in the home who has not resided in PA for the past 2 years
- 4) Beginning 4/24/2026 BOM will add all new employees residency status to her personnel file audit sheet.
- 5) Beginning 4/24/2026 BOM will audit 100% of staff files, including agency staff, for PA residency status X 2 weeks.
- 6) BOM will audit 10% of staff files monthly X 3 after initial 2 week audits are completed for PA residency status.
- 7) Completed FBI clearances will be provided by ED to the dept upon completion, but no later than 5/30/2026.
- 7) Audits will be reviewed with ED at quarterly QA meeting to be held on July 20,2026

Licensee's Proposed Overall Completion Date: 05/30/2026

Implemented [REDACTED] - 06/04/2026)

54a Direct Care Staff

2. Requirements

2600.

54.a. Direct care staff persons shall have the following qualifications:

- 1. Be 18 years of age or older, except as permitted in subsection (b).
- 2. Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry.
- 3. Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care services with reasonable skill and safety.

Description of Violation

Direct Care Staff Person D, hired [REDACTED], does not have a high school diploma, GED, or active registry status on the Pennsylvania nurse aide registry.

Plan of Correction

Accept [REDACTED] - 05/12/2026)

Staff person D did have a high school diploma in the community at the time of the survey, which was provided to the surveyors prior to the exit conference. This information was provided to Claire Mendez prior to the LIS being put out. 54a states only that the document must be present in the home (which it was in the business office during an audit) and available for review by surveyors (which it was), and not that it must be in the personnel file at the immediate time the file is opened. It does not say that it cannot be produced at any time during the survey. Due to this, we ask that this violation be removed from the record.

- 1) High school diploma for Staff person D was located in the business office and provided to the surveyors by ED at

54a - Direct Care Staff (continued)

their request.

2) Beginning 5/12/2026 BOM will utilize a personnel file check list to ensure all required regulatory paperwork is in order.

3) Beginning 5/12/2026 BOM will audit 100% of employee files X 1 to ensure all required regulatory paperwork is in each personnel folder.

4) Beginning 5/17/2026 BOM will audit employee files monthly X 6 months.

5) Audits will be reviewed with ED at quarterly QA meeting scheduled on 7/20/2026..

Licensee's Proposed Overall Completion Date: 05/30/2026

Implemented (████) - 06/04/2026)

65d - Initial Direct Care Training

3. Requirements

2600.

65.d. Direct care staff persons hired after April 24, 2006, may not provide unsupervised ADL services until completion of the following:

1. Training that includes a demonstration of job duties, followed by supervised practice.
2. Successful completion and passing the Department-approved direct care training course and passing of the competency test.
3. Initial direct care staff person training to include the following:
 - i. Safe management techniques.
 - ii. ADLs and IADLs
 - iii. Personal hygiene.
 - iv. Care of residents with dementia, mental illness, cognitive impairments, an intellectual disability and other mental disabilities.
 - v. The normal aging-cognitive, psychological and functional abilities of individuals who are older.
 - vi. Implementation of the initial assessment, annual assessment and support plan.
 - vii. Nutrition, food handling and sanitation.
 - viii. Recreation, socialization, community resources, social services and activities in the community.
 - ix. Gerontology.
 - x. Staff person supervision, if applicable.
 - xi. Care and needs of residents with special emphasis on the residents being served in the home.
 - xii. Safety management and hazard prevention.
 - xiii. Universal precautions.
 - xiv. The requirements of this chapter.
 - xv. Infection control.
 - xvi. Care for individuals with mobility needs, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration, if applicable to the residents served in the home.

Description of Violation

Direct Care Staff Person A, hired on █████, began providing unsupervised ADL services on █████. However, the staff person did not complete and pass the Department-approved direct care training course and pass the competency test.

Plan of Correction

Accept (████) - 05/12/2026)

Staff person A is an agency staff person

- 1) Staff person A was immediately removed from the schedule by ED on 4/23/2026, pending completion of her direct care certificate
- 2) Staff person A completed and provided her direct care certificate to BOM on 4/23/2026
- 3) Beginning 4/24/2026, BOM will audit 100% of agency staff binders X 2 weeks to ensure direct care certificates

65d Initial Direct Care Training (continued)

are available

4) Beginning 4/24/2026 BOM will add agency staff to her staffing file audits. Agency care givers will not be permitted to pick up shifts without proof of direct care certificate on file in the community.

5) BOM will audit regular staff and agency staff files monthly beginning 5/15/2026 x 2 months

6 Audits will be reviewed with ED at Quarterly QA meeting to be held on July 20.2026

Licensee's Proposed Overall Completion Date: 05/15/2026

Implemented [REDACTED] - 06/04/2026)