



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**Emailing Date: November 30, 2022**

[REDACTED]  
[REDACTED]  
Sage Atwater Tenant TRS, LLC  
[REDACTED]  
[REDACTED]

RE: Echo Lake  
900 North Atwater Drive  
Malvern, Pennsylvania 19355  
License #: 147130

Dear [REDACTED]:

As the result of your home's recent request to adjust the use of the physical space, the Department has granted an approval for a revised license issued under the authority of 55 pa. Code Ch. 2800 (relating to Assisted Living Residence). The approved capacity revision request is an increase in SDCU beds from 30 to 38 and an increase in assisted living beds from 96 to 104. The expiration date of the license remains unchanged.

Any future requests for changes in capacity should be forwarded to the Department for review and consideration in accordance with the applicable regulations. The revised license is enclosed.

Sincerely,

A handwritten signature in black ink that reads "Jamie F. Buchenauer".

Jamie Buchenauer  
Deputy Secretary  
Office of Long-term Living

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

**Facility Information**

Name: *ECHO LAKE* License #: *14713* License Expiration: *10/20/2023*  
Address: *900 NORTH ATWATER DRIVE, MALVERN, PA 19355*  
County: *CHESTER* Region: *SOUTHEAST*

**Administrator**

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

**Legal Entity**

Name: *SAGE ATWATER TENANT TRS LLC*  
Address: [REDACTED]  
Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *I-1* Date: *09/23/2020* Issued By: *Tredyffrin Township*

**Staffing Hours**

Resident Support Staff: Total Daily Staff: *114* Waking Staff: *86*

**Inspection Information**

Type: *Partial* Notice: *Announced* BHA Docket #:  
Reason: *New* Exit Conference Date: *11/09/2022*

**Inspection Dates and Department Representative**

11/09/2022 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *96* Residents Served: *65*

**Special Care Unit**

In Home: *Yes* Area: *Connections* Capacity: *30* Residents Served: *29*

**Hospice**

Current Residents: *xx*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *64*  
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *49* Have Physical Disability: *0*

**Inspections / Reviews**

**11/09/2022 - Partial**

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *11/25/2022*

Inspections / Reviews (*continued*)

## 11/16/2022 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/22/2022

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 11/21/2022

## 11/17/2022 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/22/2022

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 12/09/2022

## 11/28/2022 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/22/2022

Reviewer: [REDACTED]

Follow-Up Type: Not Required

85d Trash cans – kitchen/bath

1. Requirements

2800.

85.d. Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

Description of Violation

On 11/09/2022 at 11:30 AM, there were two trash cans without a lid in the service kitchen on the 3rd floor .

Plan of Correction

Accept ( [redacted] - 11/17/2022)

Dining Director and dining staff were educated by ED on regulation 2600.85D on 11/15/22 ( see attached)

All trash cans, in each of the 3 kitchens, were covered by Dining Director 11/11/22

Trash can cover audit for trash cans in each of our 3 kitchens was completed on 11/11/22. Audit for compliance will be performed by Dining Director weekly, beginning 11/15/22 and will be ongoing, to ensure trash cans are covered at all times (see attached)

An audit tool will be kept for documentation purposes.

Dining Director is responsible for ongoing compliance.

Licensee's Proposed Overall Completion Date: 11/17/2022

Implemented ( [redacted] - 11/28/2022)

89b Hot water temperature

2. Requirements

2800.

89.b. Hot water temperature in areas accessible to the resident may not exceed 120°F.

Description of Violation

On 11/09/2022 around 11:00 AM, the hot water temperature at the bathroom sink located in

- the 3rd floor common bathroom on the left side of the elevator was 134.2° F
- the 3rd floor common bathroom on the right side of the elevator was 134.6° F
- resident room # 305 was 130.8° F
- resident room # 308 was 129.4° F
- resident room # 310 was 130.5° F
- resident room # 320 was 129° F

Plan of Correction

Accept (CM - 11/17/2022)

Maintenance Director was educated by ED on regulation 89B on 11/15/22 (see attached)

[redacted] an outside vendor, was called and came to assess hot water 11/10/22.

Findings were:

1. jammed actuating mixing valve. Mixing valve was unjammed and water temp returned to within normal range.

The water temperature was checked in all rooms 11/15/22 by the maintenance director (see attached)

Water temps will be randomly checked in 4 rooms daily x 14 days, weekly x 4 weeks then monthly x 2, beginning 11/16/22. 4 room water temperatures will be checked by maintenance with a thermometer and recorded on audit sheet (see attached)

Maintenance Director is responsible for ongoing compliance

Licensee's Proposed Overall Completion Date: 11/17/2022

89b Hot water temperature (continued)

Implemented (CM - 11/28/2022)

91 Telephone Numbers

3. Requirements

2800.

91. Emergency Telephone Numbers - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and assisted living residence complaint hotline shall be posted on or by each telephone with an outside line.

Description of Violation

There are no emergency telephone numbers to include the nearest hospital and fire Department on or by the telephone in the home's front/reception desk.

Plan of Correction

Accept (CM - 11/17/2022)

BOM was educated by ED on regulation 2800.19 11/15/22 (see attached)

Emergency numbers were placed at concierge desk 11/9/22.

Audit will be done by the BOM to ensure ongoing compliance with posted emergency numbers at the concierge desk weekly x4, beginning 11/16/22,, then monthly x2. The BOM is responsible for the audit and an audit tool will be utilized to ensure the emergency numbers are posted (see attached)

BOM is responsible for ongoing compliance

Licensee's Proposed Overall Completion Date: 11/17/2022

Implemented (CM - 11/28/2022)

105g Dryer lint removal

4. Requirements

2800.

105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

Description of Violation

On 11/09/2022 at 10:40 AM, there was a thick accumulation of lint in the lint traps of the two dryers in the 1st floor launderette. There were no clothes in the dryer at the time.

Plan of Correction

Accept (CM - 11/17/2022)

Maintenance Director and wellness staff were educated by ED on regulation 2800.105g (see attached)

All lint traps were cleaned 11/9/22 by the maintenance director

Lint traps will be checked/cleaned weekly x 4 weekly, then monthly x2 to ensure ongoing compliance by maintenance. They will check and clean lint traps on the schedule listed above (see attached)

Maintenance Director is responsible for ongoing compliance

Licensee's Proposed Overall Completion Date: 11/17/2022

Implemented (CM - 11/28/2022)