



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
Norristown State Hospital
1001 Sterigere Street
Bldg 2 Rm. 161
Norristown, Pennsylvania 19401

ADULT RESIDENTIAL LICENSING

1-866-711-4115
610-270-1137

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
Mailing Date: June 13, 2011

Ms. Carol A. Oliver, Executive Director
Devereux Foundation
139 Leopard Road
Berwyn, Pennsylvania 19312

RE: Devereux Whitlock Personal Care Home- Hillcrest Cottage
229 Leopard Road
Berwyn, Pennsylvania 19312

Dear Ms. Oliver:

As a result of the Department of Public Welfare's licensing inspection on April 18, 2011 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

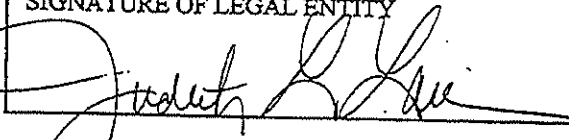
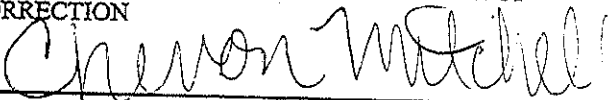
Sincerely,


A handwritten signature in black ink that reads "Chevon Mitchell" followed by a stylized monogram "BR".

Chevon Mitchell
Regional Licensing Administrator

Enclosure(s)
Violation Report

VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME Devereux Whitlock Personal Care Home - Hillcrest Cottage, 229 Leopard Road Berwyn, PA 19312		CURRENT LICENSE NUMBER 198140	
INSPECTION DATES (Include all dates of the inspection) 04/18/2011		REGIONAL REPRESENTATIVE Chevon Mitchell	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) Judith L. Lau, Executive Director			
SIGNATURE OF LEGAL ENTITY 	DATE 5/25/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 5/31/11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
15a The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. §§ 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.	On 3/21/11 resident #1 threw a TV remote at resident #2, which gave the resident a fat lip. The home did not report this incident of abuse to the local area agency on aging or the State Department of Aging.	5/25/11	 Licensed Personal Care Home Administrator, or his designee, will immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act and 6 Pa. Code 15.21-15.27 (related to reporting suspected abuse) and comply with its requirements regarding restrictions on staff persons.	5/31/11 