



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: November 27, 2012

Ms. Patricia Monroe, Director
Elwyn, Inc
Hartman House
111 Elwyn Road
Elwyn, Pennsylvania 19063

RE: Elwyn- Whitehouse
111 Elwyn Road
Elwyn, Pennsylvania 19063

Dear Ms. Monroe:

As a result of the Department of Public Welfare's licensing inspection on September 24, 2012 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.

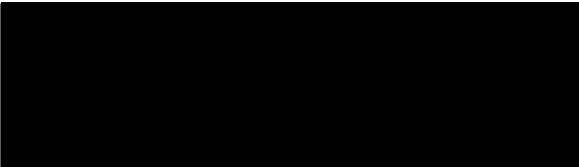
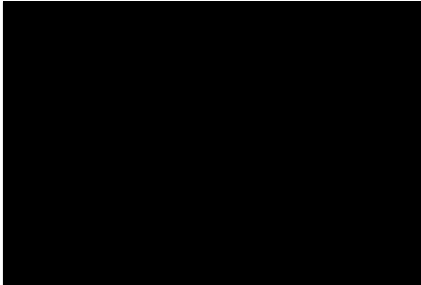
Sincerely,

A handwritten signature in black ink that reads "Chevon Miller / SR". The signature is written in a cursive, flowing style.

Chevon Miller
Regional Licensing Administrator

Enclosure(s)

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

PCH Name: ELWYN WHITEHOUSE		License Number: 122980
Address: 111 ELWYN RD, ELWYN, PA 19603		County: Delaware
Administrator: Ben Dourk		Region: SOUTHEAST
Legal Entity Name: ELWYN INC		
Legal Entity Address: HARTMAN HOUSE 111 ELWYN ROAD, ELWYN, PA 19083		
Certificate(s) of Occupancy		
Staffing Hours		
Resident Support:	Total Daily Staff: 5	Waking Staff: 4
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 09/24/2012: Adams, Patricia; Foulkes, Kimberli		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:	Random Indicators:	
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 5 Number of Residents Served: 5 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: 	Number of Residents who: 	

Violation Report: 12298 - 09/24/2012 - Adams, Patricia
 PCH Name: ELWYN WHITEHOUSE

1. REGULATION 55 Pa.Code §2600

2600.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

2a. DESCRIPTION OF VIOLATION

On 9/18/12, resident #1 struck resident # 2 on the right side of the head without provocation and knocked the resident to the ground. The home did not report, until 9/24/12, the incident to the local agency on aging or the State Department of Aging.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

For any instance of suspected abuse of a resident, the Unit Director will contact COSA, which is the local agency on aging. This contact will be documented in a progress note. Unit Director will review all documentation after all proper notifications have been made to ensure that COSA has been notified and that it has been documented appropriately.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Patricia Adams Director

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Patricia Adams Director

Date

11/13/12

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of

11/16/12
 (Date)

Plan of correction implementation status as of

11/16/12
 (Date)

The above plan of correction was approved by

CPM
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented