



Sent via e-mail lnewcomb@5ssl.com
Sent via e-mail tsmall@5ssl.com
March 20, 2020

Mr. Bruce J. Mackey, Jr.
President and Chief Executive Officer
Five Star Quality Care NS Operator, LLC
Attn: Licensing
400 Centre Street
Newton, Massachusetts 02458

RE: The Devon Senior Living
445 North Valley Road
Devon, Pennsylvania 19333
License #: 132060

Dear Mr. Mackey:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on January 14, 2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

Shawn Parker

Shawn Parker
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: *THE DEVON SENIOR LIVING*

License Number: *13206*

Address: *445 NORTH VALLEY FORGE ROAD,, DEVON, PA 19333*

County: *CHESTER*

Region: *SOUTHEAST*

Administrator

Name: *Tiffanie Small*

Phone: *6102632300*

Email: *LNEWCOMB@5SSL.COM*

Legal Entity

Name: *FIVE STAR QUALITY CARE NS OPERATOR LLC*

Address: *400 CENTRE STREET, ATTN: LICENSING, NEWTON, MA, 2458*

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *84*

Total Daily Staff: *168*

Waking Staff: *126*

Inspection

Type: *Partial*

BHA Docket #:

Notice: *Unannounced*

Reason: *Incident*

Inspection Dates and Department Representative

01/14/2020 - On-Site: Sabrina Freeman

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *84*

Residents Served: *66*

Secured Dementia Care Unit

In Home: *Yes*

Area: *Memory Care*

Capacity: *11*

Residents Served: *6*

Hospice

Current Residents: *6*

Number of Residents Who:

Receive Supplemental Security Income: *0*

Are 60 Years of Age or Older: *66*

Diagnosed with Mental Illness: *2*

Diagnosed with Intellectual Disability: *0*

Have Mobility Need: *18*

Have Physical Disability: *0*

42b - Abuse

Regulations

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On 01-07-20 at approximately 5:00 pm, Staff person A tied a plastic bag to resident #1's bedroom door and hallway rail in order to prevent the resident from leaving out of their bedroom.

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.)

Employee was immediately suspended pending investigation. Employee was terminated on 1/8/2020. On 1/8/2020, 1/9/2020, and 1/21/2020 direct care staff and housekeeping was re-educated on resident rights, abuse/neglect and OAPSA. Dining staff will be re-educated by 2/28/2020.

All staff will continue to be trained on resident rights, abuse and OAPSA upon hire and annually per staff training plan by the Director of Resident Care or Executive Director.

Executive Director will monitor all training for compliance quarterly.

(see attached in-service sheets from 1/8/2020, 1/9/2020 and 1/21/2020)

Legal Entity Representative

Tiffanie Small
Signature

Tiffanie Small Executive Director
Printed Name and Title

2/25/20
Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 03-17-2020
(Date)

Plan of correction implementation status as of 03-17-2020
(Date)

The above plan of correction was approved by SP
(Initials)

Implemented
 Not Implemented

42p - Restraints

Regulations

2600.

42.p. A resident shall be free from restraints.

Description of Violation

On 01-07-20 at approximately 5:00 pm, Staff person A tied a plastic bag to resident #1's bedroom door and hallway rail in order to prevent the resident from leaving out of their bedroom.

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.)

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All staff will continue to be trained on resident rights, abuse and OAPSA upon hire and annually per staff training plan by the Director of Resident Care or Executive Director.

Executive Director will monitor all training for compliance quarterly.

(see attached in-service sheets from 1/8/2020, 1/9/2020 and 1/21/2020)

Legal Entity Representative

	Tiffanie Small Executive Director	2/25/20
Signature	Printed Name and Title	Date

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The above plan of correction is approved as of	03-17-2020	Plan of correction implementation status as of	03-17-2020
	(Date)		(Date)
The above plan of correction was approved by	<u>SP</u>	<input checked="" type="checkbox"/> Implemented	<input type="checkbox"/> Not Implemented
	(Initials)		

121a - Unobstructed Egress

Regulations

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

On 01-07-20 at approximately 5:00 pm, Staff person A tied a plastic bag to resident #1's bedroom door and hallway rail in order to prevent the resident from leaving out of their bedroom.

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.)

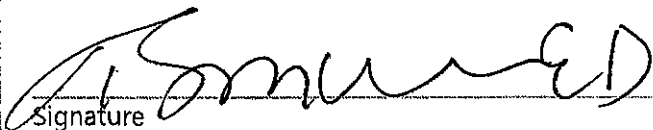
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All staff will continue to be trained on resident rights, abuse and OAPSA upon hire and annually per the staff training plan by the Director of Resident Care or Executive Director.

The Executive Director will monitor all training for compliance quarterly.

(see attached in-service sheets from 1/8/2020, 1/9/2020 and 1/21/2020)

Legal Entity Representative


Signature

Tiffanie Small Executive Director
Printed Name and Title
2/25/20
Date

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