



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Emailing Date: August 19, 2022

[REDACTED]
Devereux Foundation, Inc.
[REDACTED]
[REDACTED]
[REDACTED]

RE: Gateside
830 Maple Avenue
Berwyn, Pennsylvania 19312
License #: 142150

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. 2600 (relating to Personal Care Homes). The approved capacity revision request is an increase from 4 to 5. 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: *GATESIDE* License #: *14215* License Expiration: *01/17/2023*
Address: *830 MAPLE AVENUE, BERWYN, PA 19312*
County: *CHESTER* Region: *SOUTHEAST*

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]
484-219-8729 [REDACTED]

Legal Entity

Name: *DEVEREUX FOUNDATION*
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *5* Waking Staff: *4*

Inspection Information

Type: *Partial* Notice: *Announced* BHA Docket #:
Reason: *New* Exit Conference Date: *07/13/2022*

Inspection Dates and Department Representative

07/13/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *4* Residents Served: *4*

Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *4* Are 60 Years of Age or Older: *0*
Diagnosed with Mental Illness: *4* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *1* Have Physical Disability: *0*

Inspections / Reviews

07/13/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *07/29/2022*

Inspections / Reviews (*continued*)

08/03/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*

Follow-Up Date: *08/08/2022*

08/10/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *08/11/2022*

85d - Trash Receptacles

1. Requirements

2600.

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 07/13/2022 at 09:40 AM, there was a half full, uncovered, unattended trash can in the home's second floor bathroom shared by 3 residents.

Plan of Correction

Accept

The trashcan was immediately replaced on the day of inspection. Moving forward, the Administrator will conduct routine checks to ensure that every trashcan in the program is covered.

Staff will on a daily routine check all trash cans and inform the Supervisor whenever a trash can is broken or without lid to have it replace immediately.

Moving forward, the PCH Administrator will conduct a monthly check along with the Program Supervisor to ensure that the program remains in compliance.

Completion Date: 07/13/2022 Licensee's Proposed Date of POC Implementation

Implemented 8/16/22 CM

101j2 - Bedroom Chairs

1. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:
2. A chair for each resident that meets the resident's needs.

Description of Violation

The home is turning an office into a resident bedroom. The room is for single occupancy but the room is not furnished yet.

Plan of Correction

Accept

A chair was placed in the room. Moving forward, the Administrator will furnish the room before seeking approval for an increase in capacity and the PCH Administrator will conduct a monthly check along with the Program Supervisor to ensure that the program remains in compliance.

Completion Date: 07/29/2022 Licensee's Proposed Date of POC Implementation

Implemented 8/16/22 CM

101j3 - Bed/Linens/Pillows/Blankets

1. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:
3. Pillows, bed linens and blankets that are clean and in good repair.

Description of Violation

The home is turning an office into a resident bedroom. The room is for single occupancy but the room is not furnished yet.

Plan of Correction

Accept

A bed with linens and pillows was added to the room. Moving forward, the Administrator will furnish the room before seeking approval for an increase in capacity and the PCH Administrator will conduct a monthly check along with the Program Supervisor to ensure that the program remains in compliance.

Completion Date: 07/29/2022 Licensee's Proposed Date of POC Implementation

Implemented 8/16/22 CM

101j4 - Bedroom Storage Area

1. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

- 4. A storage area for clothing that includes a chest of drawers and a closet or wardrobe space with clothing racks or shelves accessible to the resident.

Description of Violation

The home is turning an office into a resident bedroom. The room is for single occupancy but the room is not furnished yet.

Plan of Correction

Accept

A dresser was placed in the room. Moving forward, the Administrator will furnish the room before seeking approval for an increase in capacity and the PCH Administrator will conduct a monthly check along with the Program Supervisor to ensure that the program remains in compliance.

Completion Date: 07/29/2022 Licensee's Proposed Date of POC Implementation

Implemented 8/16/22 CM

101j5 - Bedside Table/Shelf

1. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

- 5. A bedside table or a shelf.

Description of Violation

The home is turning an office into a resident bedroom. The room is for single occupancy but the room is not furnished yet.

Plan of Correction

Accept

A bedside table was placed in the room. Moving forward, the Administrator will furnish the room before seeking approval for an increase in capacity and the PCH Administrator will conduct a monthly check along with the Program Supervisor to ensure that the program remains in compliance.

Completion Date: 07/29/2022 Licensee's Proposed Date of POC Implementation

Implemented 8/16/22 CM

101j6 - Mirror

1. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

- 6. A mirror.

Description of Violation

The home is turning an office into a resident bedroom. The room is for single occupancy but the room is not furnished yet.

Plan of Correction

Accept

A mirror was placed in the room. Moving forward, the Administrator will furnish the room before seeking approval for an increase in capacity and the PCH Administrator will conduct a monthly check along with the Program Supervisor to ensure that the program remains in compliance.

Completion Date: 07/29/2022 Licensee's Proposed Date of POC Implementation

Implemented 8/16/22 CM

101j7 - Lighting/Operable Lamp

1. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

- 7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

The home is turning an office into a resident bedroom. The room is for single occupancy but the room is not furnished yet.

Plan of Correction

Accept

A lamp was placed in the room. Moving forward, the Administrator will furnish the room before seeking approval for an increase in capacity and the PCH Administrator will conduct a monthly check along with the Program Supervisor to ensure that the program remains in compliance.

Completion Date: 07/29/2022 *Licensee's Proposed Date of POC Implementation*

Implemented 8/16/22 CM

124 - Notice to Fire Department

1. Requirements

2600.

124. The home shall notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.

Description of Violation

The home does not have documentation of written notification to the local fire department of the address of the home, location of the bedrooms, and the assistance needed to evacuate in an emergency.

Plan of Correction

Accept

A letter was sent to the local fire department to inform them of the increase in capacity, the location of the bedrooms and the assistance needed. A notice will be sent to the fire department thereafter on an annual basis by the Director of Quality Management.

Completion Date: 07/18/2022 *Licensee's Proposed Date of POC Implementation*

Implemented 8/16/22 CM