

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

December 4, 2023

[REDACTED] QI COORDINATOR  
ELWYN OF PENNSYLVANIA AND DELAWARE  
[REDACTED]

RE: ELWYN - RAINBOW HOUSE  
66 EAST OLD BALTIMORE PIKE  
ELWYN, PA, 19063  
LICENSE/COC#: 12267

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/06/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,  
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: *ELWYN - RAINBOW HOUSE* License #: *12267* License Expiration: *01/15/2024*  
 Address: *66 EAST OLD BALTIMORE PIKE, ELWYN, PA 19063*  
 County: *DELAWARE* Region: *SOUTHEAST*

**Administrator**

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

**Legal Entity**

Name: *ELWYN OF PENNSYLVANIA AND DELAWARE*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-3 SP* Date: *01/11/1995* Issued By: *PA L&I*

**Staffing Hours**

Resident Support Staff: *4* Total Daily Staff: *10* Waking Staff: *8*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Incident* Exit Conference Date: *11/06/2023*

**Inspection Dates and Department Representative**

*11/06/2023 - On-Site:* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: *6* Residents Served: *6*  
 Secured Dementia Care Unit  
 In Home: *No* Area: Capacity: Residents Served:  
 Hospice  
 Current Residents: *0*  
 Number of Residents Who:  
 Receive Supplemental Security Income: *5* Are 60 Years of Age or Older: *4*  
 Diagnosed with Mental Illness: *6* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *0* Have Physical Disability: *0*

**Inspections / Reviews**

**11/06/2023 Partial**  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *11/18/2023*

**11/30/2023 - POC Submission**  
 Submitted By: [REDACTED] Date Submitted: *12/01/2023*  
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *12/08/2023*

Inspections / Reviews *(continued)*

12/04/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/01/2023

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

42b Abuse

1. Requirements

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 [redacted] at approximately [redacted], resident #1 struck resident #2 on the head with an umbrella, causing a laceration requiring emergency hospital treatment. Resident #1 had found resident #2 standing in front of the shared mirror in the room and became agitated. Resident #2 was treated with Dermabond, a tetanus injection, and two tablets of Motrin 200mg with instructions to follow up with the resident's primary care physician.

Resident #1's Assessment and Support Plan (RASP), dated [redacted], indicates that the resident has no problem with irritability, judgment, agitation, aggression, or hallucinations. The resident has a diagnosis of paranoid schizophrenia. A new assessment was not completed after the incident and a new plan was not developed.

Plan of Correction

Accept [redacted] - 11/30/2023

The residents were separated and resident #1 was counseled by staff on what is considered abuse and respectful treatment of [redacted] roommate and housemates. Resident #1 was informed by the administrator, on 1 [redacted], that repeated violation of regulation 2600.42.b and the house rules could constitute a termination of [redacted] resident-home contract and discharge from the facility. The primary counselor completed a new assessment for resident #1 on [redacted], due to the appearance of aggressive behavior toward resident #2. Staff will check in weekly with all residents during their weekly counseling sessions to discuss respectful treatment of others and check in to see if there are any identified issues occurring, effective 10/12/2023. The administrator will review all counseling notes weekly starting on 10/12/2023 to ensure completion. On 11/6/23, Staff was re-trained on when to complete assessments again due to the status change by the administrator. Effective on 10/12/2023 the administrator will be responsible for making sure new assessments are completed after every incident that indicates behavior differing from what is in the previous assessment and a plan will be developed to address behavior.

Proposed Overall Completion Date: 11/29/2023

Licensee's Proposed Overall Completion Date: 11/29/2023

Implemented [redacted] - 12/04/2023

225c Additional Assessment

2. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

- 2. If the condition of the resident significantly changes prior to the annual assessment.

Description of Violation

Resident #1's most recent assessment, completed [redacted], indicates that the resident has no problem with irritability, judgment, agitation, or aggression. A new assessment was not completed after resident #1 physically assaulted and injured resident #2 on [redacted].

Plan of Correction

Accept [redacted] - 11/30/2023

Resident #1 RASP was updated after a new assessment was completed on [redacted] by [redacted] primary counselor. Staff was re-trained on completing/ updating RASP for any changes in behavior, status, etc. on [redacted] by the administrator of the home. Effective on [redacted], the administrator will review every incident and direct staff to

**225c Additional Assessment (continued)**

*complete an updated resident assessment and support plan (RASP), if there is an indication that any resident involved in the incident has had a significant change in status (mental or medical). QI Specialist will conduct chart audits on a bi monthly basis to include reviewing incidents and RASPs for needed updates, effective 11/29/23.*

*Proposed Overall Completion Date: 11/29/2023*

**Licensee's Proposed Overall Completion Date: 11/29/2023**

**Implemented ( [REDACTED] - 12/04/2023)**