

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

February 7, 2024

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

RE: ELWYN - FRIENDSHIP HALL  
64 EAST OLD BALTIMORE PIKE  
ELWYN, PA, 19063  
LICENSE/COC#: 12289

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/03/2024 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 - FRIENDSHIP HALL* License #: *12289* License Expiration: *01/15/2024*  
 Address: *64 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-1* Date: *11/06/1985* Issued By: *DOH*

**Staffing Hours**

Resident Support Staff: Total Daily Staff: *9* Waking Staff: *7*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Complaint, Incident* Exit Conference Date: *01/03/2024*

**Inspection Dates and Department Representative**

*01/03/2024 - On-Site:* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *8* Residents Served: *8*

**Secured Dementia Care Unit**  
 In Home: *No* Area: Capacity: Residents Served:

**Hospice**  
 Current Residents: *0*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *3*  
 Diagnosed with Mental Illness: *8* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *1* Have Physical Disability: *2*

**Inspections / Reviews**

**01/03/2024 - Partial**  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *01/21/2024*

**01/18/2024 - POC Submission**  
 Submitted By: [REDACTED] Date Submitted: *01/19/2024*  
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *01/26/2024*

Inspections / Reviews *(continued)*

02/07/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/19/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42c - Treatment of Residents

1. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

Resident [REDACTED] has been diagnosed with [REDACTED], [REDACTED], and [REDACTED]. The resident is known for becoming [REDACTED]. On the night of [REDACTED] direct care staff member A suspected resident [REDACTED] of taking a bag of potato chips left on the dining room table for resident [REDACTED]. At [REDACTED], the staff member went to resident [REDACTED] room and asked if the resident had taken the item, which Resident [REDACTED] denied. There were more chips and other snacks available for resident [REDACTED], but staff member A persisted in confronting resident [REDACTED] over the missing chips. After resident [REDACTED] used profanity and derogatory epithets toward staff member A, the staff person took the conflict personally, telling a supervisor they would not stand for being spoken to in such a way. Staff member A ordered resident [REDACTED] to the resident's room and exchanged in back-and-forth yelling and cursing, rather than redirection and deescalating techniques.

Staff member A had not received required annual trainings in meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan, or in personal care service needs of the resident.

Plan of Correction

Accept [REDACTED] - 01/18/2024)

Staff member A's employment with Elwyn was terminated on [REDACTED], by the Administrator. The supervisor and Administrator of the home will conduct training with all staff persons on "meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan, or in personal care service needs of the resident." This training will be conducted for all staff, to include each resident in the home, and documented on [REDACTED]. Additionally, the administrator and supervisor will conduct a "Dialogue with Dignity" training for all staff on [REDACTED]. A form titled "PCH Required Annual Trainings" has been created to document the training annually and will be implemented by the administrator on [REDACTED], to ensure ongoing compliance with this regulation.

Proposed Overall Completion Date: 01/17/2024

Licensee's Proposed Overall Completion Date: 01/17/2024

Implemented [REDACTED] - 02/07/2024)

65e - 12 Hours Annual Training

2. Requirements

2600.

65.e. Direct care staff persons shall have at least 12 hours of annual training relating to their job duties.

1. Staff person orientation shall be included in the 12 hours of training for the first year of employment.

Description of Violation

Direct care staff member A received only 1.5 hours of training in 2023.

Plan of Correction

Accept [REDACTED] - 01/18/2024)

Staff member A's employment with Elwyn was terminated on [REDACTED], by the Administrator. Staff member A actually received 22.15 hours of training between [REDACTED] and [REDACTED], but due to Elwyn transitioning from a prior electronic training system to a new one, the record was not readily available at the time of inspection. All staff training records will be reviewed, and staff will be directed to take training as needed by the administrator to ensure adequate training hours. This will be completed by the Administrator by [REDACTED]. A form titled "Monthly Training

65e - 12 Hours Annual Training (continued)

Review and Reminder" will be completed by the supervisor and reviewed by the administrator on a monthly basis beginning on [REDACTED], to ensure compliance with training requirements.

Licensee's Proposed Overall Completion Date: 01/26/2024

Implemented [REDACTED] - 02/07/2024)

65f - Training Topics

3. Requirements

2600.

65.f. Training topics for the annual training for direct care staff persons shall include the following:

- 1. Medication self-administration training.
- 2. Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
- 5. Personal care service needs of the resident.

Description of Violation

Direct care staff member A did not receive training in the following topics during training year 2023:

- 1. Medication self-administration training.
- 2. Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
- 5. Personal care service needs of the resident.

Plan of Correction

Accept [REDACTED] - 01/18/2024)

Staff member A's employment with Elwyn was terminated on [REDACTED], by the Administrator. The supervisor and Administrator of the home will conduct training with all staff persons on "meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan, or in personal care service needs of the resident." This training will be conducted for all staff, to include each resident in the home, and documented on [REDACTED]. A form titled "PCH Required Annual Trainings" has been created to document the training annually and will be implemented by the administrator on [REDACTED], to ensure ongoing compliance with this regulation.

Proposed Overall Completion Date: 01/17/2024

Licensee's Proposed Overall Completion Date: 01/17/2024

Implemented [REDACTED] 02/07/2024)