

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

December 13, 2024

[REDACTED]
DEVEREUX FOUNDATION INC

[REDACTED]
CHRIS BETTS
[REDACTED]

RE: DEVEREUX PA ADULT SERVICES PCH
- HILLCREST COTTAGE
229 LEOPARD ROAD
BERWYN, PA, 19312
LICENSE/COC#: 19814

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/07/2024 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: DEVEREUX PA ADULT SERVICES PCH - HILLCREST COTTAGE **License #:** 19814 **License Expiration:** 07/20/2025
Address: 229 LEOPARD ROAD, BERWYN, PA 19312
County: CHESTER **Region:** SOUTHEAST

Administrator

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

Legal Entity

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

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 12/31/2023 **Issued By:** L & I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 12 **Waking Staff:** 9

Inspection Information

Type: Full **Notice:** Unannounced **BHA Docket #:**
Reason: Renewal **Exit Conference Date:** 10/07/2024

Inspection Dates and Department Representative

10/07/2024 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 21 **Residents Served:** 10

Secured Dementia Care Unit

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

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 6 **Are 60 Years of Age or Older:** 7
Diagnosed with Mental Illness: 9 **Diagnosed with Intellectual Disability:** 4
Have Mobility Need: 2 **Have Physical Disability:** 0

Inspections / Reviews

10/07/2024 Full

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 10/26/2024

10/28/2024 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 12/12/2024
Reviewer: [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 11/30/2024

Inspections / Reviews *(continued)*

12/13/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/12/2024

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

3c - Post Current License

1. Requirements

2600.

3.c. The personal care home shall post the current license, a copy of the current license inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

Description of Violation

On [REDACTED] the home's current violation report and a copy of 55 Pa.Code Chapter 2600, dated 7/28/2023, were not posted in a conspicuous and public place in the home.

Plan of Correction

Accept [REDACTED] 10/28/2024)

The supervisor posted the program's most recent inspection summary/violation report on [REDACTED]. To prevent a recurrence of this violation, the supervisor will conduct a monthly check to ensure the inspection summary/violation report is posted and remains posted. The supervisor will develop a checklist to track the monthly supervisory checks for at least 90 days, starting on 11/1/2024 and ending on 1/31/2025.

Licensee's Proposed Overall Completion Date: 10/22/2024

Implemented [REDACTED] - 12/13/2024)

18 - Compliance With Laws

2. Requirements

2600.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

Per 34 Pa.Code Chapter 3, known as the Boilers and Unfired Pressure Vessels regulations (governed by Department of Labor and Industry): If a home has a boiler, it must have a valid "Certificate of Boiler or Pressure Vessel Operation" issued by the PA Department of Labor and Industry. Upon expiration of the certificate, boilers must be inspected, and if they pass inspection they will be issued a new certificate. The home's boiler certificate expired 7/30/2023.

Plan of Correction

Accept [REDACTED] - 10/28/2024)

On [REDACTED], the Devereux maintenance manager submitted a recertification request to CHUBB, an outside company that conducts boiler inspections for the agency. To prevent a repeat of this violation, the program supervisor will conduct an internal inspection of the boiler system in the program every 90 days and notify the maintenance department of any upcoming recertification inspection. This 90-day internal boiler inspection by the supervisor will begin on 11/1/2024 and end on 10/30/2025 with a tracking log entry.

Licensee's Proposed Overall Completion Date: 10/25/2024

Implemented [REDACTED] 12/13/2024)

62 - Contact List

3. Requirements

2600.

62. List of Staff Persons - The administrator shall maintain a current list of the names, addresses and telephone numbers of staff persons including substitute personnel and volunteers.

Description of Violation

The administrator maintains a list of staff persons that does not include Staff Persons A, B and C.

62 Contact List (continued)

Plan of Correction

Accept [redacted] - 10/28/2024)

The supervisor updated the staff list on [redacted] and added staff persons A, B, and C. Moving forward, the supervisor will review the list quarterly, update it when a new employee is hired, and reconcile it with the program's staffing schedule. The supervisor will develop a checklist to track updates to the staff list and schedule, which will start on 11/1/2024 and end on 1/31/2025.

Licensee's Proposed Overall Completion Date: 10/22/2024

Implemented ([redacted] 12/13/2024)

95 - Furniture and Equipment

4. Requirements

2600.

95. Furniture and Equipment - Furniture and equipment must be in good repair, clean and free of hazards.

Description of Violation

On [redacted], at 9:01 AM, water was leaking from the bottom of the dishwasher in the kitchen.

Plan of Correction

Accept [redacted] 10/28/2024)

After the discovery, the supervisor entered a maintenance request on [redacted] for the dishwasher's repair or replacement. To prevent this violation in the future, the supervisor will check the dishwasher weekly for any leak or damage and immediately enter a maintenance request for the next six months, starting 11/1/2024 and ending 4/30/2025

Licensee's Proposed Overall Completion Date: 10/22/2024

Implemented [redacted] - 12/13/2024)

102i - Soap Dispenser

5. Requirements

2600.

102.i. A dispenser with soap shall be provided within reach of each bathroom sink. Bar soap is not permitted unless there is a separate bar clearly labeled for each resident who shares a bathroom.

Description of Violation

There was no soap available on [redacted] in the shared bathroom off of the pantry.

Plan of Correction

Accept [redacted] - 10/28/2024)

Staff refilled the soap dispenser on [redacted]. To prevent being cited for this violation, the overnight staff will check the bathrooms in the program every night and refill the dispensers if needed. This check will be ongoing for twelve months, from 11/1/2024 to 11/1/2025. In addition to the overnight check, the supervisor will do a weekly check and document on a checklist.

Licensee's Proposed Overall Completion Date: 10/22/2024

Implemented [redacted] - 12/13/2024)

103d - Storing Food Off Floor

6. Requirements

2600.

103.d. Food shall be stored off the floor.

103d - Storing Food Off Floor (continued)

Description of Violation

On [redacted] at 12:56 PM, bottles of emergency water were stored on the floor in the pantry.

Plan of Correction

Accept [redacted] - 10/28/2024)

After the inspection, staff removed the emergency water from the pantry floor and temporarily placed it on a shelf. On 10/8/2024, the supervisor purchased the water rack stand for storage. Moving forward, the supervisor will check the emergency water monthly to ensure the program maintenance has adequate water for residents' emergencies for the next twelve months. The monthly check will start on 11/1/2024 and end on 12/31/2025, and it will be documented on the supervisory checklist.

Licensee's Proposed Overall Completion Date: 10/22/2024

Implemented [redacted] - 12/13/2024)

132f - Alternate Exit Routes

7. Requirements

2600. 132.f. Alternate exit routes shall be used during fire drills.

Description of Violation

The Annex Door exit was used for every fire drill held from [redacted] through [redacted].

Plan of Correction

Accept [redacted] - 10/28/2024)

After the inspection, on [redacted], the staff conducted the program's monthly fire drill, and the residents evacuated the building using the front and kitchen exits. The supervisor will discuss using different exits in the program in case of a fire emergency with staff during the program's monthly staff meetings for the next six months, starting 11/2024 to 4/2025. The supervisor will document it on the supervisory checklist. The supervisor will review the fire drill reports to ensure that alternate exit routes are used.

Licensee's Proposed Overall Completion Date: 10/22/2024

Implemented [redacted] - 12/13/2024)

183d - Prescription Current

8. Requirements

2600. 183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

On [redacted] the following discontinued medication, prescribed for individual 1, was in the home's medication cart:

- [redacted] was discontinued on 2/26/2024.
- [redacted] was discontinued on 6/3/2024.

Plan of Correction

Accept [redacted] - 10/28/2024)

After the inspection on [redacted], the supervisor removed the discontinued medications [redacted] and the [redacted] solution from MedCart. The supervisor also reviewed the overnight medication check protocol with the overnight staff in 1:1 sessions on 10/15 and 10/18. To prevent this violation in the future, the staff will continue to conduct the overnight checks and the supervisor will conduct a weekly check of the overnight medication check that staff

183d Prescription Current (continued)

complete as well as reconcile it with the med cart. This process started on 10/15/2024 and will continue for six months until 3/30/2025.

Licensee's Proposed Overall Completion Date: 10/22/2024

Implemented (█ - 12/13/2024)

183e - Storing Medications

9. Requirements

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

On █ at 2:20 PM, Resident █ prescription of █ tablet had a puncture on the back of the bubble pack at spot 26.

Plan of Correction

Accept (█ - 10/28/2024)

Resident █ medication, █ with the puncture on the back of the bubble pack, was removed from the MedCart on 10/7/2024 and disposed of accordingly. The supervisor completed a refill order for the medication with the pharmacy. To prevent this violation in the future, the staff will continue to conduct the overnight checks and the supervisor will conduct a weekly check of the overnight medication check that staff complete as well as reconcile it with the med cart. This process started on 10/15/2024 and will continue for six months until 3/30/2025.

Licensee's Proposed Overall Completion Date: 10/22/2024

Implemented (█ - 12/13/2024)

187d - Follow Prescriber's Orders

10. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident █ is prescribed █. However, this medication was not available in the home on █.

Plan of Correction

Accept (█ - 10/28/2024)

Resident █ prescribed █ was found and placed in the med cart on 10/7/2024. However, on 10/9/2024, the nurse completed the refill order for the medication. To prevent this violation in the future, the staff will continue to do the overnight medication checks and notify the nurse or supervisor about medications that would need refills. The supervisor will also conduct a weekly check of the overnight medications to ensure that those running low refill orders are completed in time. This process started on 10/15/2024 and will continue for six months until 3/30/2025.

Licensee's Proposed Overall Completion Date: 10/22/2024

Implemented (█ - 12/13/2024)