



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Emailing date: March 10, 2025

[REDACTED]
[REDACTED]
BH Brightview Devon Opco, LLC
[REDACTED]
[REDACTED]

RE: Brightview Devon
License #: 151870

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspections on January 8, 2025 of the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because this is a new legal entity operating the home.

In accordance with 55 Pa.Code § 2600.11(b) (relating to procedural requirements for licensure or approval of personal care homes, a re-inspection of your newly licensed facility will be conducted within 3 months of the effective date of this license. Complete compliance with all applicable regulations is required in order to maintain your license.

During the inspection, citations on the enclosed Licensing Inspection Summary were found. All citations specified on the Licensing Inspection Summary must be corrected by the dates specified on the Licensing Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Your NEW license is enclosed, based on substantial but not complete compliance with 55 Pa.Code Ch. 2600.

Sincerely,

A handwritten signature in black ink that reads "Juliet Marsala".

Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosures
License
Licensing Inspection Summary

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

March 6, 2025

[REDACTED]
BH Brightview Devon Opco, LLC
301 East Conestoga Rd
Wayne, PA, 19087

RE: BRIGHTVIEW DEVON
301 EAST CONESTOGA ROAD
WAYNE, PA, 19087
LICENSE/COC#: 15187

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/08/2025 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: *BRIGHTVIEW DEVON* License #: *15187* License Expiration:

Address: *301 EAST CONESTOGA ROAD, WAYNE, PA 19087*

County: *CHESTER* Region: *SOUTHEAST*

Administrator

Name: [REDACTED]

Legal Entity

Name: *BH Brightview Devon Opco, LLC*

Address: [REDACTED]

Certificate(s) of Occupancy

Type: *C-1* Date: *03/13/2019* Issued By: *Tredyffrin Township*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *102* Waking Staff: *77*

Inspection Information

Type: *Full* Notice: *Announced* BHA Docket #:

Reason: *New* Exit Conference Date: *01/08/2025*

Inspection Dates and Department Representative

01/08/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: Residents Served: *70*

Secured Dementia Care Unit

In Home: *Yes* Area: *Wellspring* Capacity: *25* Residents Served: *23*

Hospice

Current Residents: *11*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *70*

Diagnosed with Mental Illness: *3* Diagnosed with Intellectual Disability: *0*

Have Mobility Need: *32* Have Physical Disability: *3*

Inspections / Reviews

01/08/2025 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *02/08/2025*

02/07/2025 - POC Submission

Submitted By: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *02/12/2025*

Inspections / Reviews *(continued)*

02/07/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/06/2025

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 03/08/2025

03/06/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/06/2025

Reviewer: [REDACTED]

Follow-Up Type: Not Required

85a - Sanitary Conditions

1. Requirements

2600.
85.a. Sanitary conditions shall be maintained.

Description of Violation

On 1/8/2025 at 11:32 am there were feces smeared in the bathroom sink of room 320.

Plan of Correction

Do Not Accept ([REDACTED] - 02/07/2025)

In response to the violation on 01/08/2025 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 01/08/2025 by the Personal Care Director to to clean the sink of the unknown matter in the sink.

To enhance the currently compliant operations, on 02/04/2025 the Personal Care Director will educate the personal care staff on the importance of cleaning unsanitary areas and review the performance expectations for the role of the resident assistant, with a completion date of 03/31/2025.

Effective 02/04/2025 the Personal Care Director will perform weekly inspections through 03/31/2025 to maintain ongoing compliance with maintaining sanitary conditions. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Proposed Overall Completion Date: 03/31/2025

Licensee's Proposed Overall Completion Date: 03/31/2025

Update: 02/07/2025

The completion date is too far in the future.

Plan of Correction

Accept [REDACTED] - 02/07/2025)

In response to the violation on 01/08/2025 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 01/08/2025 by the Personal Care Director to to clean the sink of the unknown matter in the sink.

To enhance the currently compliant operations, on 02/04/2025 the Personal Care Director will educate the personal care staff on the importance of cleaning unsanitary areas and review the performance expectations for the role of the resident assistant, with a completion date of 03/04/2025.

Effective 02/04/2025 the Personal Care Director will perform weekly inspections through 03/07/2025 to maintain ongoing compliance with maintaining sanitary conditions. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Proposed Overall Completion Date: 03/07/2025

Licensee's Proposed Overall Completion Date: 03/07/2025

Evidence of Completion

Implemented [REDACTED] - 03/06/2025)

See attached.

91 - Telephone Numbers

2. Requirements

2600.

91. Emergency Telephone Numbers - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

Description of Violation

There are no emergency telephone numbers to include the nearest hospital and fire department on or by the telephone in room 320.

Plan of Correction

Accepted [redacted] - 02/07/2025)

In response to the violation on 01/08/2025 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 02/04/2025 by the Personal Care Director to place a sticker with emergency telephone numbers on the telephone in 320.

To enhance the currently compliant operations, on 02/04/2025 the Personal Care Director will identify all residents with a telephone with an outside line and complete an audit to ensure that all residents in the personal care neighborhood have posted emergency phone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency manage and personal care complaint hotline next to or on the telephone, with a completion date of 02/28/2025.

Effective 02/04/2025 the Personal Care Director will perform with new admissions reviews through 02/28/2025 to maintain ongoing compliance with posting telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline on or by each telephone with an outside line. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Proposed Overall Completion Date: 02/28/2025

Licensee's Proposed Overall Completion Date: 02/28/2025

Evidence of Completion

Implemented [redacted] - 03/06/2025)

See attached.

103g - Storing Food

3. Requirements

2600.

103.g. Food shall be stored in closed or sealed containers.

Description of Violation

On 1/8/2025 at 11:46 am the fish in the main kitchen walk-in freezer was opened and unsealed.

Plan of Correction

Do Not Accept [redacted] - 02/07/2025)

In response to the violation on 01/08/2025 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 01/08/2025 by the Dining Services Director to to reseal the bag the fish was in.

To enhance the currently compliant operations, on 02/04/2025 the Dining Service Director will work with the kitchen staff to check the refrigerators freezers daily for any open products.

103g - Storing Food (continued)

Effective 02/04/2025 the Dining Service Director will perform monthly checks utilizing the Dining Operation Checklist to maintain ongoing compliance with ensuring food is stored in closed or sealed containers. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Proposed Overall Completion Date: 04/30/2025

Licensee's Proposed Overall Completion Date: 04/30/2025

Update: 02/07/2025

The completion date is too far in the future.

Plan of Correction

Accept [REDACTED] 02/07/2025)

In response to the violation on 01/08/2025 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 01/08/2025 by the Dining Services Director to to reseal the bag the fish was in.

To enhance the currently compliant operations, on 02/04/2025 the Dining Service Director will work with the kitchen staff to check the refrigerators freezers daily for any open products.

Effective 02/04/2025 the Dining Service Director will perform monthly checks utilizing the Dining Operation Checklist to maintain ongoing compliance with ensuring food is stored in closed or sealed containers. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Proposed Overall Completion Date: 03/07/2025

Licensee's Proposed Overall Completion Date: 03/07/2025

Evidence of Completion

Implemented [REDACTED] 03/06/2025)

See attached.