

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

February 20, 2025

[REDACTED]
BRIGHTVIEW WAYNE LLC
[REDACTED]
[REDACTED]

RE: BRIGHTVIEW DEVON
301 EAST CONESTOGA ROAD
WAYNE, PA, 19087
LICENSE/COC#: 14459

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/16/2025 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 #: 14459 License Expiration: 07/24/2025
Address: 301 EAST CONESTOGA ROAD, WAYNE, PA 19087
County: CHESTER Region: SOUTHEAST

Administrator

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

Legal Entity

Name: BRIGHTVIEW WAYNE LLC
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: R 4 Date: 03/13/2019 Issued By: Tredyffrin Township

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 109 Waking Staff: 82

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint, Incident Exit Conference Date: 01/16/2025

Inspection Dates and Department Representative

01/16/2025 On Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 95 Residents Served: 70

Secured Dementia Care Unit

In Home: Yes Area: Memory Care Unit Capacity: 25 Residents Served: 24

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: 39 Have Physical Disability: 3

Inspections / Reviews

01/16/2025 - Partial

Lead Inspector: [REDACTED] Follow Up Type: POC Submission Follow Up Date: 02/07/2025

Inspections / Reviews (*continued*)

02/07/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/18/2025

Reviewer: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 02/11/2025

02/07/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/18/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 02/18/2025

02/20/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/18/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

16d - Final Incident Report

1. Requirements

2600.

16.d. The home shall submit a final report, on a form prescribed by the Department, to the Department's personal care home regional office immediately following the conclusion of the investigation.

Description of Violation

On [REDACTED], the home submitted an alleged abuse initial incident report for resident [REDACTED]. The home concluded the investigation with the staff member's termination on [REDACTED]. However, the home did not submit a final report to the Department regional office immediately following the conclusion of the investigation.

Plan of Correction

Directed [REDACTED] 02/07/2025)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on [REDACTED] by the Executive Director to submit the final report.

To enhance the currently compliant operations, on 02/07/2025 the Executive Director will review the Resident Incident, Accident or Unanticipated Occurrences Brightview Policy with the leadership team. This policy states that a final incident report must be submitted to the state office at the conclusion of the investigation, with a completion date of 02/28/2025.

Effective 02/07/2025 the Executive Director will perform monthly reviews through 04/30/2025 to maintain ongoing compliance with will review any investigations and verify that a final report was submitted to the Department regional office. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally during monthly QAPI/Safety meetings for continuous improvement purposes.

Directed Plan of Correction [REDACTED] 2/7/25):

In addition to the steps noted in the Plan of Correction noted above, the Executive Director will conduct a training on the importance of timely submission of incident reports to all administrative staff initially by 2/28/25 and to all new staff upon hire, starting immediately.

Proposed Overall Completion Date: 02/28/2025

Directed Completion Date: 02/28/2025

Implemented [REDACTED] - 02/20/2025)

42c - Treatment of Residents

2. Requirements

2600.

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

Description of Violation

Based on resident [REDACTED] interview, [REDACTED] stated that on [REDACTED] [REDACTED] was lying in bed as staff member A attempted to provide care. In a nasty and impatient attempt to complete the treatment, the staff member yanked the bed linens up so quickly and forcefully that the resident struck [REDACTED] head on a dresser next to the bed. The resident added that it caught [REDACTED] off guard because the staff member did not warn [REDACTED] that [REDACTED] would yank the bed linens so forcefully. The resident reported that it was a hit without pain, discomfort, bruising, or other injuries.

42c - Treatment of Residents (continued)**Plan of Correction****Accept ([REDACTED] - 02/07/2025)**

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on [REDACTED] by the Health Service Director to assess the resident for injury. The Health Service Director reported the incident to the residents doctor, family and appropriate state agencies on 11/25/24. An internal investigation was opened and the staff member was placed on immediate administrative leave. The internal investigation concluded on 12/3/24 and the staff member was terminated. A final report was submitted on 1/16/25.

To enhance the currently compliant operations, on 02/07/25 the Business Office Director will review the assigned trainings on resident's rights to be completed by all Personal Care associates, with a completion date of 03/07/25.

Effective 03/01/25 the Business Office Director will perform monthly audits of all trainings for Personal Care associates through 04/30/2025 to maintain ongoing compliance with treating residents with respect and dignity.

Any

deficiencies will be corrected immediately, and findings will be documented and reviewed internally during monthly QAPI/Safety meetings for continuous improvement purposes.

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

Implemented ([REDACTED] 02/20/2025)