

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

March 26, 2025

[REDACTED]  
DEVEREUX FOUNDATION, INC.  
[REDACTED]

RE: DEVEREUX POCONO CENTER,  
DREHER MANOR  
1547 MILL CREEK ROAD  
NEWFOUNDLAND, PA, 18445  
LICENSE/COC#: 23526

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/24/2025, 02/03/2025 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: DEVEREUX POCONO CENTER, DREHER MANOR License #: 23526 License Expiration: 10/27/2025  
Address: 1547 MILL CREEK ROAD, NEWFOUNDLAND, PA 18445  
County: WAYNE Region: NORTHEAST

**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-1 Date: 12/20/1993 Issued By: L & I

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 11 Waking Staff: 8

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #:  
Reason: Incident Exit Conference Date: 01/24/2025

**Inspection Dates and Department Representative**

01/24/2025 - On-Site: [Redacted]  
02/03/2025 - Off-Site: [Redacted]

**Resident Demographic Data as of Inspection Dates**

General Information			
License Capacity:	24	Residents Served:	8
Secured Dementia Care Unit			
In Home:	No	Area:	Capacity:
Residents Served:			
Hospice			
Current Residents: 1			
Number of Residents Who:			
Receive Supplemental Security Income:	0	Are 60 Years of Age or Older:	7
Diagnosed with Mental Illness:	5	Diagnosed with Intellectual Disability:	7
Have Mobility Need:	3	Have Physical Disability:	0

**Inspections / Reviews**

01/24/2025 Partial  
Lead Inspector: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 03/07/2025

03/14/2025 - POC Submission  
Submitted By: [Redacted] Date Submitted: 03/26/2025  
Reviewer: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 03/21/2025

Inspections / Reviews *(continued)*

03/26/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/26/2025

Reviewer: [REDACTED]

Follow Up Type: *Bypass Document Submission*

03/26/2025 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/26/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

15a Resident Abuse Report

1. Requirements

2600.

15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § 10225.701 10225.707) and 6 Pa. Code § 15.21 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

Staff Member A was allegedly found to be partially unclothed on Resident [redacted] bed in a room shared by Resident [redacted] and Resident [redacted] on [redacted] at 7:30pm. The incident was not reported until the morning of [redacted] and was not immediately reported to Liberty Healthcare and The Area Agency On Aging as per the Older Adult Protective Services Act.

Plan of Correction

Accept [redacted] - 03/26/2025)

The Quality Improvement Director reviewed the Devereux procedure for reporting incidents that occur at the personal care home (copy attached) on [redacted]. The QI Director found that the policy contains the required component to report all incidents of abuse to Adult Protective Services and Older Adult Protective Services within 24 hours. On [redacted] the Operations Manager retrained staff on the reporting requirements of Adult Protective Services and Older Adult Protective Services. In addition staff were retrained on the requirement to contact the on-call QI Director immediately upon discovering an incident. Once contacted that an incident has occurred, the QI Director will complete the report within 24 hours of the incident occurring as required by APS and OAPS and will complete the ACT 70 form and submit it to the appropriate entity. The staff member who did not make a timely report to their supervisor which resulted in this citation has been retrained on Devereux Policy 215 Reporting and Responding to Abuse and Neglect of an Individual. This training was completed on [redacted]. Staff will continue to complete annual training on Reporting and Responding to Abuse and Neglect of an Individual via the Devereux Learning Management System. The required training is automatically assigned to all staff. People Operations and the staff supervisor receive an automated email if this training is not completed on time. The next due date for Abuse and Neglect training is January 1, 2026.

Licensee's Proposed Overall Completion Date: 03/20/2025

Implemented ([redacted] - 03/26/2025)

15b Supervisor Plan

2. Requirements

2600.

15.b. If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

Description of Violation

Staff member A was allegedly found to be partially unclothed on Resident [redacted] bed in a room shared by Resident [redacted] and Resident [redacted] on [redacted] at 7:35pm. The incident was not reported to management of the home until the following day at 3:40pm and Staff Member A was not immediately suspended following the incident. As per interviews with the staff, the staff member worked from 3pm on [redacted] to 7am on [redacted].

Plan of Correction

Accept [redacted] - 03/26/2025)

The Quality Improvement Director reviewed the Devereux procedure for reporting incidents that occur at the personal care home (copy attached) on [redacted]. The QI Director found that the policy contains the required component to immediately develop and implement a plan of supervision or suspend the staff person involved in an incident of abuse. This was not completed immediately since the staff did not immediately report the incident to

15b Supervisor Plan (continued)

their supervisor. On [REDACTED] the staff member was retrained on Policy 215 Reporting and Responding to Abuse and Neglect of an Individual; Sexual Abuse Prevention, Abuse and Neglect: Respond and Report. In addition all staff were retrained on immediately contacting the on call QI Director and their supervisor whenever an incident of abuse is suspected. When any allegation of abuse is reported, the QI Director, the Operations Manager or Supervisor of the personal care home in conjunction with People Operations Director shall immediately develop and implement a plan of supervision for the staff person involved in the alleged incident. This is facilitated by the person receiving the report via the on call contact list. Staff will continue to complete annual training on Reporting and Responding to Abuse and Neglect of an Individual via the Devereux Learning Management System. The required training is automatically assigned to all staff. People Operations and the staff supervisor receive an automated email if this training is not completed on time. The next due date for Abuse and Neglect training is January 1, 2026.

Licensee's Proposed Overall Completion Date: 03/20/2025

Implemented [REDACTED] - 03/26/2025)

16c - Written Incident Report

3. Requirements

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

An alleged incident of resident abuse occurred in the home on [REDACTED] at 7:30pm. The home did not report the incident to the Department until [REDACTED] at 10:45am.

Plan of Correction

Accept [REDACTED] 03/26/2025)

The Quality Improvement Director reviewed the Devereux procedure for reporting incidents that occur at the personal care home (copy attached) on [REDACTED]. The QI Director found that the policy contains the requirement to report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours. Effective 3/5/25, the QI Director will report the incident per the policy via fax utilizing the department form. In addition, the PCH will report the incident to Adult Protective Services and Older Adult Protective Services within 24 hours. On [REDACTED] the Operations Manager retrained staff on reporting requirements including the requirement to contact the on call QI Director to ensure timely reporting. Staff will continue to complete annual training on Reporting and Responding to Abuse and Neglect of an Individual via the Devereux Learning Management System. The required training is automatically assigned to all staff. People Operations and the staff supervisor receive an automated email if this training is not completed on time. The next due date for Abuse and Neglect training is January 1, 2026.

Licensee's Proposed Overall Completion Date: 03/20/2025

Implemented [REDACTED] 03/26/2025)