

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

April 11, 2025

[REDACTED], ELWYN
ELWYN OF PENNSYLVANIA AND DELAWARE
[REDACTED], 111 ELWYN ROAD
ELWYN, PA, 19063

RE: ELWYN - WHITEHOUSE
111 ELWYN ROAD
ELWYN, PA, 19603
LICENSE/COC#: 12298

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/19/2025, 03/10/2025, 03/11/2025, 03/12/2025 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: *ELWYN - WHITEHOUSE* License #: *12298* License Expiration: *01/15/2026*
 Address: *111 ELWYN ROAD, ELWYN, PA 19603*
 County: *DELAWARE* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *ELWYN OF PENNSYLVANIA AND DELAWARE*
 Address: [REDACTED], *111 ELWYN ROAD, ELWYN, PA, 19063*
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-3 SP* Date: *06/18/1998* Issued By: *CWOPA Dept of L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *4* Waking Staff: *3*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal, Incident* Exit Conference Date: *03/12/2025*

Inspection Dates and Department Representative

02/19/2025 - On-Site: [REDACTED]
 03/10/2025 - Off-Site: [REDACTED]
 03/11/2025 - Off-Site: [REDACTED]
 03/12/2025 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *5* Residents Served: *4*

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

Hospice
 Current Residents: *0*

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

Inspections / Reviews

02/19/2025 - Full
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/04/2025*

04/02/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/10/2025

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 04/18/2025

04/11/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/10/2025

Reviewer: [REDACTED]

Follow-Up Type: Not Required

16c - Written Incident Report

1. 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

On [REDACTED], Resident 1 was transported to the local hospital due [REDACTED], as indicated in the progress notes. The home did not report this incident to the department.

Plan of Correction

Accept ([REDACTED] - 04/02/2025)

An incident report for [REDACTED] hospital visit on [REDACTED] was completed and sent to the department on 4/2/25 by the administrator. Staff were retrained on Incident Reporting by the supervisor on 3/19/25. Management will review every incident report to ensure notifications are made to the department, starting on 3/12/25.

Licensee's Proposed Overall Completion Date: 04/02/2025

Implemented ([REDACTED] - 04/11/2025)

103e - Left Overs

2. Requirements

2600.

103.e. Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

Description of Violation

On 2/19/25, a slice of cranberry cheesecake in a plastic take-away container, a cheesesteak sandwich covered in tinfoil, and an open bag of French fries in the main kitchen fridge were not labeled or dated.

Plan of Correction

Accept ([REDACTED] - 04/02/2025)

On 2/19/25, leftover food items were discarded by the supervisor. All staff were retrained to regulation 103 regarding labeling and dating food by management on 3/19/25. The supervisor will check the refrigerator and cabinets daily, to ensure that items are properly labeled and dated.

Licensee's Proposed Overall Completion Date: 04/02/2025

Implemented ([REDACTED] - 04/11/2025)

103g - Storing Food

3. Requirements

2600.

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

Description of Violation

On 2/19/25, a bag of French fries in the main kitchen fridge was not in a sealed container or bag.

Repeat Violation Date: 1/26/24.

Plan of Correction

Accept ([REDACTED] - 04/02/2025)

On 2/19/25, poorly stored food items were discarded by the supervisor. All staff were retrained to regulation 103 regarding the storage of food by management on 3/19/25. The supervisor will check the refrigerator and cabinets daily, to ensure that items are properly stored.

103g - Storing Food *(continued)*

Licensee's Proposed Overall Completion Date: 04/02/2025

Implemented ([REDACTED] - 04/11/2025)