

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

September 2, 2026

[REDACTED]
ELWYN OF PENNSYLVANIA AND DELAWARE
[REDACTED]

RE: CLARK'S MANOR
2978 NORTH PROVIDENCE ROAD
MEDIA, PA, 19063
LICENSE/COC#: 14802

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/27/2026 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: CLARK'S MANOR

License #: 14802

License Expiration: 09/13/2026

Address: 2978 NORTH PROVIDENCE ROAD, MEDIA, PA 19063

County: DELAWARE

Region: SOUTHEAST

Administrator

Name:

Phone:

Email:

Legal Entity

Name: ELWYN OF PENNSYLVANIA AND DELAWARE

Address:

Phone:

Email:

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff:

Total Daily Staff: 5

Waking Staff: 4

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Incident

Exit Conference Date: 07/27/2026

Inspection Dates and Department Representative

07/27/2026 - On-Site:

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 8

Residents Served: 5

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 1

Diagnosed with Mental Illness: 5

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 0

Have Physical Disability: 0

Inspections / Reviews

07/27/2026 Partial

Lead Inspector:

Follow-Up Type: POC Submission

Follow-Up Date: 08/16/2026

08/13/2026 - POC Submission

Submitted By:

Date Submitted: 08/24/2026

Reviewer:

Follow-Up Type: POC Submission

Follow-Up Date: 08/18/2026

Inspections / Reviews (*continued*)

08/17/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 08/24/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 08/26/2026

09/02/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/24/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

25b - Contract Signatures

1. Requirements

2600.

25.b. The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

Description of Violation

The resident-home contract, dated [REDACTED] for resident [REDACTED] was not signed by the resident.

Plan of Correction

Accept [REDACTED] - 08/17/2026)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on [] by the [] to Following the audit on 7/27/26, the resident was offered to review and sign the Private Pay Agreement again with the Clark's Manor Director of Operation, for which [REDACTED] declined 3 consecutive days, and this was documented on the agreement.

To enhance the currently compliant operations, on 08/14/2026 the Quality Improvement Specialist will The Quality Improvement Specialist reviewed the process with the Director of Operations for Clark's Manor on 8/13/26 to ensure 2600.25.b. The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees, is met, including at least three opportunities documented for the resident to sign if they have declined, with a completion date of 08/14/2026.

Effective 09/01/2026 the Quality Improvement Specialist will perform quarterly audits of Chart Review, for the next 12 months to maintain ongoing compliance with Quarterly Chart reviews will be conducted by the assigned Quality Improvement Specialist beginning 9/1/26 and ongoing. Effective 9/1/26 the Quality Improvement Specialist will perform quarterly audits of resident private pay agreements through 8/30/27 to maintain ongoing compliance with having contract signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes. Any deficiencies will be corrected immediately, and findings will be documented and reported to the Quality Improvement Specialist for further review and continuous improvement.

Licensee's Proposed Overall Completion Date: 08/14/2026

Implemented ([REDACTED] 09/02/2026)

183e - Storing Medications

2. 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 [REDACTED] the blister pack for resident [REDACTED] - take 1 tablet by mouth every night at bedtime had a puncture in slot 15.

183e - Storing Medications (continued)

Plan of Correction**Accept** [REDACTED] - 08/17/2026)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 07/27/2026 by the Director of Operations to On 7/27/26 the tablet in the punctured blister pack was destroyed by the Nurse while on site as per protocols. Replacement medication was ordered by the nurse immediately from the assigned pharmacy and replaced by delivery on the evening of 7/27/26.

To enhance the currently compliant operations, on 08/17/2026 the Director of Operations will Review of this protocol will be review of this protocol will occurring during the staff meeting on 8/17/26, with a completion date of 08/24/2026.

Effective 08/14/2026 the ABH Nursing will perform monthly audit of Controlled medications log for the next 12 months to maintain ongoing compliance with ensuring prescription medications, OTC medications and CAM will be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions. Review of this protocol will be review of this protocol will occurring during the staff meeting on 8/17/26. Medication audits are completed monthly by nursing. Any deficiencies will be corrected immediately, and findings will be documented and reported to the Director of ABH Nursing for further review and continuous improvement.

Licensee's Proposed Overall Completion Date: 08/24/2026

Implemented [REDACTED] - 09/02/2026)

185a - Implement Storage Procedures

3. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

On [REDACTED] Staff Member A performed a count of the narcotic medication alone. Per the Home's policy under Administration and storage of controlled substances; section B: two staff members are to count, sign, date, and time the utilization sheet.

Plan of Correction**Accept** [REDACTED] - 08/17/2026)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 08/17/2026 by the Director of Operations to 3. Policy 611 Medication Monitoring will be presented in full at staff meeting on 8/17/26 to all staff to ensure "two staff members are to count, sign, date, and time the utilization sheet". This will be completed by the Director of Operations.

To enhance the currently compliant operations, on 08/17/2026 the Director of Operations will Any staff not present will review the minutes, ask any questions to administrator, then sign staff meeting minutes within one week of the meeting, with a completion date of 08/25/2026.

185a Implement Storage Procedures (continued)

Effective 8/14/26 the ABH nurse will perform monthly audits of controlled medication administration log for the next 12 months to maintain ongoing compliance with ensuring the home will develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons. Medication audits are completed monthly by nursing. Any deficiencies will be corrected immediately, and findings will be documented and reported to the Director of ABH Nursing for further review and continuous improvement.

Licensee's Proposed Overall Completion Date: 08/25/2026

Implemented ([REDACTED] - 09/02/2026)