

Department of Human Services  
Bureau of Human Service Licensing

May 5, 2021

[REDACTED]  
BRIGHTVIEW WAYNE LLC  
218 NORTH CHARLES STREET  
BALTIMORE, MD 21201

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

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/25/2021, 01/25/2021, 01/26/2021, 02/02/2021, 02/03/2021, 02/04/2021, 02/12/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
[REDACTED]

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

**Facility Information**

**Name:** BRIGHTVIEW DEVON **License #:** 14459 **License Expiration Date:** 07/24/2021  
**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:** 218 NORTH CHARLES STREET, BALTIMORE, MD, 21201  
**Phone:** [REDACTED] **Email:** [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:** 100 **Waking Staff:** 75

**Inspection**

**Type:** Partial **Notice:** Unannounced **BHA Docket #:**  
**Reason:** Incident **Exit Conference Date:** 02/12/2021

**Inspection Dates and Department Representative**

01/25/2021 - On-Site: [REDACTED]  
01/25/2021 - Off-Site: [REDACTED]  
01/26/2021 - Off-Site: [REDACTED]  
02/02/2021 - Off-Site: [REDACTED]  
02/03/2021 - Off-Site: [REDACTED]  
02/04/2021 - Off-Site: [REDACTED]  
02/12/2021 - Off-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 95 **Residents Served:** 51

**Secured Dementia Care Unit**

**In Home:** Yes **Area:** Wellspring **Capacity:** 25 **Residents Served:** 21

**Hospice**

**Current Residents:** 6

**Resident Demographic Data as of Inspection Dates (continued)**

**Number of Residents Who:**

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 51

Diagnosed with Mental Illness: 10

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 49

Have Physical Disability: 0

**Inspections / Reviews**

**01/25/2021 - Partial**

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 03/21/2021

**3/22/2021 - POC Submission**

Lead Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 03/24/2021

**3/24/2021 - POC Submission**

Lead Reviewer: [REDACTED]

Follow-Up Type: Document Submission

Follow-Up Date: 03/31/2021

**5/5/2021 - Document Submission**

Lead Reviewer: [REDACTED]

Follow-Up Type: Not Required

25a - Written Contract and Review

1. Requirements

2600.

25.a. Prior to admission, or within 24 hours after admission, a written resident-home contract between the resident and the home shall be in place. The administrator or a designee shall complete this contract and review and explain its contents to the resident and the resident's designated person if any, prior to signature.

Description of Violation

Resident # 1, admitted [REDACTED], did not have a resident-home contract completed until 8/8/19.

Plan of Correction

Accept

Resident #1 moved into BV Devon on [REDACTED] Lease was signed on [REDACTED] (Attachment #1) Upon review of resident's face sheet and move in report, date of move in was incorrectly entered as [REDACTED] The date was updated to the correct move in date on 3/15/2021. A review of all resident face sheets was conducted by the Business Office Director on 3/15/2021 to determine if other residents had move in dates incorrectly entered (Attachment #2) To prevent this from re-occurring the Executive Director will review the move in date at the time the resident lease is signed. ED, Health Services Director and Sales Directors will review policy on Move in/Move out Process for Personal Care Home (PA) outlining the screening process by 3/19/2021. (See attachment #6) ED, Health Services Director and Sales Directors will review PA regulation 2600.224.a regarding pre-admission screening form requirements by 3/19/2021 (See attachment #7).

Completion Date: 03/19/2021

Document Submission

Implemented

Updated Executive Director audit attached on 5/5/2021

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Repeat Violation

On [REDACTED] at 2:15 A.M. Staff Member A found [REDACTED] Resident # 1 and Resident # 2 in bed with an opened Nuplazid bottle and pills prescribed to Resident # 2 on the bedding. Resident # 2 was awake, alert, and laughing. Resident # 1 was sleeping. Resident #1 stated that [REDACTED] was attempting to end their lives as [REDACTED] felt they would not live through Covid-19. Resident # 1 has been assessed capable of self-administering medications. Resident # 2 is not capable of self-administration. Resident # 1 administered an unknown number of Nuplazid pills to [REDACTED] and Resident # 2. Both residents were sent to the emergency room for treatment.

The home allowed Resident # 1 to administer Resident # 2's medications on a regular basis.

Repeated Violation: 3/30/20

42b - Abuse (continued)

Plan of Correction

Accept

Upon observation of described abuse, 911 was called, authorities were notified and Residents #1 and #2 were physically separated and sent to the Emergency Department, thereby preventing further harm to Resident #2. This was done on [REDACTED]. To prevent an incident such as this from re-occurring the director team will discuss all incident reports at the daily stand up meeting, starting 3/22/2021. The Health Service Director will be responsible to bring details of incidents to the stand up meeting daily. The Health Services team and E.D. will also continue to discuss all residents in Behavior Rounds meeting (initiated 6/15/2020, Attachment #3) This discussion will help identify any resident at risk for abuse as well as any resident that may potentially cause harm to another.

Completion Date: 03/19/2021

Document Submission

Implemented

completed and ongoing.

42q - Compensation

1. Requirements

2600.

- 42.q. A resident shall be compensated in accordance with State and Federal labor laws for labor performed on behalf of the home. Residents may voluntarily and without coercion perform tasks related directly to the resident's personal space or common areas of the home.

Description of Violation

1/1/21 to 1/21/21 Resident #1 was administering medications to Resident #2. The home provides medication administration by the trained staff if a resident needs this service. Resident # 2 is need of medication administration. The home did not compensate Resident #1 for the service provided to Resident #2.

Plan of Correction

Accept

Resident # 2 was assessed as needing medication administration. Resident #1 was willing to provide this service for [REDACTED]. As a result, resident #2 was not charged for the service, therefore, rendering the lack of those charges as compensation to resident #1. To prevent this from occurring in the future, all residents will be assessed upon move-in, upon change in condition, and every 6 months as per PA regulations for his/her ability to self-administer medications. [REDACTED] will not be permitted to administer medications for their [REDACTED] who has been deemed incapable of self-administration of medications. Effective 3/12/2021, residents will not be permitted to perform labor on behalf of the home, when those duties are offered/not offered by the home itself unless the resident voluntarily performs those tasks associated with their own personal space or common area. The Health Services Director is responsible for the assessment of each resident's needs for assistance with personal care.

Completion Date: 03/19/2021

Document Submission

Implemented

completed and ongoing

182b - Prescription Medication

1. Requirements

2600.

- 182.b. Prescription medication that is not self-administered by a resident shall be administered by one of the following:
  1. A physician, licensed dentist, licensed physician's assistant, registered nurse, certified registered nurse practitioner, licensed practical nurse or licensed paramedic.
  2. A graduate of an approved nursing program functioning under the direct supervision of a professional nurse who is present in the home.

182b - Prescription Medication (continued)

- 3. A student nurse of an approved nursing program functioning under the direct supervision of a member of the nursing school faculty who is present in the home.
- 4. A staff person who has completed the medication administration training as specified in § 2600.190 (relating to medication administration training) for the administration of oral; topical; eye, nose and ear drop prescription medications; insulin injections and epinephrine injections for insect bites or other allergies.

**Description of Violation**

*From 1/1/21 to 1/21/21 Resident # 1 administered medications to Resident # 2. Resident # 1 is not a physician, licensed dentist, registered nurse, certified nurse practitioner, physician's assist, licensed practical nurse, licensed paramedic, graduate of a nursing program, a student nurse, or a staff member who has completed the medication administration training.*

**Plan of Correction**

**Accept**

*On [REDACTED] Resident #1 and #2 were sent to the ER and subsequently moved out of the community. To prevent this from reoccurring all residents will be assessed to determine their ability to self-administer only their own medications. This assessment is completed upon move in and (frequency of self med assessments in PA). Residents that are assessed to need assistance with medication administration will have medication administered by an RN, LPN or medication technician that is employed by BV Devon. ED, Health & Wellness Directors and Certified Medication associates will complete education on the home's Medication Management policy by 3/19/2021. (See Attachment #4) ED, Health & Wellness Directors and Certified Medication associates will be complete education on PA regulations 2600.181 through 2600.189b by 3/19/2021. (See attachment #5) The Health Service Director is responsible for assessment of each resident's ability to self medicate. This has been in place since inception of community licensure on 7/24/2019.*

**Completion Date:** 03/19/2021

**Document Submission**

**Implemented**

*Completed. Attachment corrected for presenter and duration of education*

187a - Medication Record

**1. Requirements**

2600.

- 187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:
  - 13. Date and time of medication administration.
  - 14. Name and initials of the staff person administering the medication.

**Description of Violation**

*Resident # 2 is prescribed Aspirin 81 mg, Azelastine Nasal Spray 137mcg, Coenzyme Q10 200 mg, Donepezil 10mg, Glucosamine Levocetirizine 5mg, Memantine 10 mg, Montelukast 10mg, Multivitamin, Nuplazid 34mg, Sertraline 50mg, and Vitamin D3 1000u. However, Resident's # 2 medication administration record does not indicate the date or time nor the name or initials of the staff person who administered the medications from 1/1/21 to 1/21/21.*

187a - Medication Record (continued)

Plan of Correction

Accept

On [REDACTED] Resident #1 and #2 were sent to the ER and subsequently moved out of the community. To prevent this from reoccurring all residents will be assessed to determine their ability to self administer only their own medications. This assessment is completed upon move in and ( frequency of self med assessments in PA). Residents that are assessed to need assistance with medication administration will have medication administered by an RN, PN or medication technician that is employed by BV Devon. ED, Health & Wellness Directors and Certified Medication associates will complete education on the home s Medication Management policy by 3/19/2021. (See Attachment #4) ED, Health & Wellness Directors and Certified Medication associates will be complete education on PA regulations 2600.181 through 2600.189b by 3/19/2021. (See attachment #5) The Health Service Director is responsible for assessment of each resident s ability to self medicate. This has been in place since inception of community licensure on 7/24/2019.

Completion Date 03/19/2021

Document Submission

Implemented

Completed. Attachments added.

187d - Follow Prescriber's Orders

1. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #2 is prescribed Nuplazid 34 mg 1 tablet once daily. However, Resident # 2 was administered an unknown amount of this medication on [REDACTED] at 2:15 A.M.

Plan of Correction

Accept

On [REDACTED] Resident #1 and #2 were sent to the ER and subsequently moved out of the community. To prevent this from reoccurring all residents will be assessed to determine their ability to self- administer only their own medications. This assessment is completed upon move in and ( frequency of self med assessments in PA). Residents that are assessed to need assistance with medication administration will have medication administered by an RN, LPN or medication technician that is employed by BV Devon. ED, Health & Wellness Directors and Certified Medication associates will complete education on the home's Medication Management policy by 3/19/2021. (See Attachment #4) ED, Health & Wellness Directors and Certified Medication associates will be complete education on PA regulations 2600.181 through 2600.189b by 3/19/2021. (See attachment #5) The Health Service Director is responsible for assessment of each resident's ability to self medicate. This has been in place since inception of community licensure on 7/24/2019.

Completion Date: 03/19/2021

Document Submission

Implemented

Completed. Attachments added

224a - Preadmission Screen Form

1. Requirements

2600.

224.a. A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

224a - Preadmission Screen Form (continued)

**Description of Violation**

Resident # 1 was admitted to the home on [REDACTED] however, the resident's preadmission screening form was completed on [REDACTED]

**Plan of Correction**

**Do Not Accept**

Upon observation of described abuse, 911 was called, authorities were notified and Residents #1 and #2 were physically separated and sent to the Emergency Department, thereby preventing further harm to Resident #2. This was done on [REDACTED] To prevent an incident such as this from re-occurring the director team will discuss all incident reports at the daily stand up meeting, starting 3/22/2021. The Health Service Director will be responsible to bring details of incidents to the stand up meeting daily. The Health Services team and E.D. will also continue to discuss all residents in Behavior Rounds meeting (initiated 6/15/2020, Attachment #3) This discussion will help identify any resident at risk for abuse as well as any resident that may potentially cause harm to another.

**Completion Date:** 03/19/2021

**Plan of Correction**

**Accept**

Resident #1 moved into BV Devon on [REDACTED] Lease was signed on [REDACTED] (Attachment #1) Upon review of resident's face sheet and move in report, date of move in was incorrectly entered as [REDACTED] The date was updated to the correct move in date on [REDACTED]. A review of all resident face sheets was conducted by the Business Office Director on 3/15/2021 to determine if other residents had move in dates incorrectly entered (Attachment #2) To prevent this from re-occurring the Executive Director will review the move in date at the time the resident lease is signed. ED, Health Services Director and Sales Directors will review policy on Move in/Move out Process for Personal Care Home (PA) outlining the screening process by 3/19/2021. (See attachment #6) ED, Health Services Director and Sales Directors will review PA regulation 2600.224.a regarding pre-admission screening form requirements by 3/19/2021 (See attachment #7).

**Completion Date:** 03/19/2021

**Document Submission**

**Implemented**

Completed and updated audit attached