



July 08, 2014

Cathy Shappell, Director
Elwyn - Beatty
111 Elwyn Road
Elwyn, PA 19063

RE: Elwyn - Beatty
License # 305260 - Regular

Dear Ms. Shappell:

As a result of the Department of Aging's licensing inspection of the above named facility on 05/22/2014, two areas of non-compliance were identified. The legal entity submitted an acceptable written plan to correct each area of non-compliance. Therefore, the Department issued a Regular License, indicating compliance with applicable statutes, ordinances and regulations.

Thank you for your continued effort to provide quality older adult daily living services. If you have questions, please contact me at (717) 214-6716.

Sincerely,

A handwritten signature in black ink, appearing to read "Kevin Longenecker".

Kevin Longenecker
Director

Enclosures

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF AGING

LICENSE

This license is hereby granted to ELWYN
LEGAL ENTITY

To operate ELWYN - BEATTY
(NAME OF CENTER)

Located at 111 ELWYN ROAD ELWYN, PA 19063
(COMPLETE ADDRESS OF CENTER)

To provide older adult daily living services.

The total number of persons which may be served at one time may not exceed 113
(MAXIMUM CAPACITY)

Restrictions: _____

This license is granted in accordance with the Act of July 11, 1990 (P.L. 499, No. 118) and Regulations.

TITLE 6. PA CODE. CHAP. 11. OLDER ADULT DAILY LIVING CENTER Dated July 03, 1993
(NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from August 01, 2014 until July 31, 2015

unless sooner revoked for non-compliance with applicable laws and regulations.

No: 305260 - Regular



ISSUING OFFICER

NOTE: This license is issued for the above address only and is not transferable. This license should be posted in a conspicuous place in the center.

Issued On: July 08, 2014

AGL01

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER LICENSE NUMBER: 305264	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/22/2014
NAME OF PROVIDER OR SUPPLIER Elwyn - Beatty		STREET ADDRESS, CITY, STATE, ZIP CODE 111 ELWYN ROAD ELWYN, PA 19063		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
1 000	Initial Comments A State licensure visit was completed on 5/22/2014 and it was determined that Elwyn-Beatty was not in compliance with the following requirements of 6 PA Code, Chapter 11, Older Adult Daily Living Centers regulations:	1 000		
1 850	11.53(a) Poisons Poisonous materials shall be kept in a cabinet, closet, cupboard or container that is locked or placed in a location, which is inaccessible to clients. This STANDARD is not met as evidenced by: Findings: Based on a direct observation, it was discovered that poisonous materials were not kept in a locked closet, cabinet or cupboard. During an inspection of the program's multi passenger bus, five packages of first aid supplies were found to have poison control warnings. A package of ten "Insect Sting Swabs" was found in an unlocked first aid kit. The label stated, "In case of accidental ingestion get medical help or a poison control center." A package of six 3.5 gram (1/8 ounce) "Burn Cream" was found in an unlocked first aid kit. The label stated, "If swallowed get medical help or a poison control center." An "Eye Dressings" kit containing five eye pads, five tape strips and one ounce of eye wash solution was found in an unlocked first aid kit. The	1 850	Plan of Correction is required 11.53(a) Elwyn shall ensure that poisonous materials are kept in a cabinet, closet, cupboard or container that is locked. Poisonous materials found in a first aid kit on a vehicle were removed on 5-22-2014 at the time of inspection. The Beatty Program Manager/RN is responsible for the facility and program operations. The Center re-trained all staff in "First Aid Practices and Equipment in Day Program" and "Storage of Chemicals, Poisons and Toxic Substances." (06-02-14) The Center Vehicles shall be inspected monthly including the contents of all first aid kits. This shall be the responsibility of the Center Program Supervisor. See attached in-service sheet and	

AUTHORIZED PROVIDER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

DEPARTMENT OF AGING APPROVAL

DATE

ATG6899

SYXP11

If continuation sheet 1 of 3

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1 850	Continued From page 1 label stated, "If swallowed get medical help or a poison control center." A box of ten "PVD Iodine Swabs" was found in an unlocked first aid kit. The label stated, "In case of accidental ingestion get medical help or a poison control center." Also a package of ten "Ammonia Inhalants" was found in an unlocked first aid kit. The label stated, "In case of accidental ingestion get medical help or a poison control center right away."	1 850		
11500	11.90(a) Fire safety training for clients A client shall be instructed upon initial admission and reinstructed quarterly in general fire safety, evacuation procedures, responsibilities during fire drills and the designated meeting place outside the building or within the fire safe area in the event of an actual fire. A client shall also be instructed in smoking safety procedures if clients or staff persons smoke at the center. This STANDARD is not met as evidenced by: Findings: Based on a review of five of eight client records and interview with center staff, it was determined that the center failed to instruct clients upon initial admission in general fire safety, evacuation procedures, responsibilities during fire drills, the designated meeting place outside the building in the event of an actual fire, and smoking safety procedures. The admission date of Client #1 is 4/10/2014, the initial fire safety training occurred on	11500	11.90(a) Elwyn shall instruct clients upon admission in general fire safety, evacuation procedures, responsibilities during fire drills and the designated meeting place outside the building and smoking safety procedures. The Program Manager, RN is responsible for the supervision of Program Specialist and program operations. All Program Specialist were re-trained on 5-28-14. The Client Fire Safety Training form has been updated to include "Must be completed on date of admission". See attached forms and signature sheet.	

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11500	Continued From page 2 5/09/2014. The admission date of Client #2 is 4/07/2014, the initial fire safety training occurred on 5/07/2014.	11500		