



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAILING DATE: August 2, 2016

Ms. Mary Joyce Morreo, Owner/Administrator
Morkel, Inc.
466 High Street
Derry, Pennsylvania 15627

RE: Sunset Ridge Personal Care Home
Certificate #: 428830

Dear Ms. Morreo:

As a result of the Department of Human Services' licensing inspection on January 12, 2016 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

Gloria Emick
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report: 42883 - 01/12/2016 - Gillespie, Denise

PCH Name: Sunset Ridge Personal Care Home

1. REGULATION 55 Pa.Code §2600

2600.42(b) - A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

2a. DESCRIPTION OF VIOLATION

Resident #1 was involved in physical altercations resulting in injuries to 2 other residents in the home on 7/16/14 and 12/30/15.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

1. Resident #1 was admitted to Inpatient Behavioral Health after the incident that occurred on 12/30/2015 [redacted].
2. This resident's medications were adjusted.
3. The Home was assured by the psychiatrist at Behavioral Health that [redacted] is capable to reside in a group setting.
4. [redacted] was released to the care of Sunset Personal Care Home.
5. [redacted] has had visits from a psychiatric nurse to assure [redacted] behavior is acceptable and appropriate in a group setting.
6. This resident has been assigned a targeted case manager from WCSI who continues to monitor [redacted] progress.
7. Sunset Ridge Personal Care Home had requested assistance after the first incident on 7/16/14.
8. There have been no further incidents since the Home has received the proper assistance.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Mary Joyce Morreo

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

Mary Joyce Morreo Administrator

Date 5-15-16

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of

8-2-16
(Date)

Plan of correction implementation status as of

8-2-16
(Date)

The above plan of correction was approved by

[Signature]
(Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 42883 - 01/12/2016 - Gillespie, Denise
 PCH Name: Sunset Ridge Personal Care Home

1. REGULATION 55 Pa.Code §2600

2600.225(a) - A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

2a. DESCRIPTION OF VIOLATION

The home has not completed an initial assessment for Resident #1, admitted on [redacted] 16.th

The home has not completed an initial assessment for Resident #2, admitted on [redacted] 15.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

1. Resident's # 1 initial assessment was not fully completed.
2. This assessment was completed following the January 2016 inspection.
3. All [redacted] paperwork is now up to date.
4. In the future, the Home will complete the required documents in an accurate and timely matter.

1. Resident's # 2 initial assessment was not fully completed.
2. This assessment was completed following the January 2016 inspection.
3. This resident is no longer at Sunset Ridge PCH.
4. In the future, the Home will complete the required documents in an accurate and timely matter.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Mary Joyce Morro

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Mary Joyce Morro Administrator

Date 5-15-16

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