



**CERTIFIED MAIL – RETURN RECEIPT
REQUESTED March 28, 2019**

Ms. Kerri Swolak
Administrator
HCRI Sun III Tenant, LP
7902 Westpark Drive
McLean, Virginia 22102

RE: Sunrise Senior Living of Dresher
1650 Susquehanna Road
Dresher, Pennsylvania 19025
License #: 128410

Dear Ms. Swolak:

As a result of the Department's Bureau of Human Services Licensing Incident inspection on January 28, 2019 of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read "Ayus Adelanwa".

Ayus Adelanwa
Workload Manager

Enclosure
Violation Report

**VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: SUNRISE SENIOR LIVING OF DRESHER		License Number: 12841
Address: 1650 SUSQUEHANNA ROAD, DRESHER, PA 19026		County: Montgomery
Administrator: Kerri Zwolak		Region: SOUTHEAST
Legal Entity Name: HCRI SUN III TENANT LP		
Legal Entity Address: 7902 WESTPARK DRIVE, MCLEAN, VA 22102		
Certificate(s) of Occupancy I-1 04/26/2006 Commonwealth of PA, L&I		RECEIVED MAR 09 2019
Staffing Hours		
Resident Support: 0	Total Daily Staff: 109	Waking Staff: 82
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Provisional, Monitoring		
On-Site Inspections Dates and Department Representatives On-Site 01/28/2019: Gray, Dean		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 105	Number of Residents who:	Receive Supplemental Security Income: 0
Number of Residents Served: 75	Are 60 Years of Age or Older: 71	Have Mental Illness: 3
Secured Dementia Care Unit in Home: Yes	Have an Intellectual Disability: 2	Have a Mobility Need: 34
Area: Reminiscence Neighborhood	Have a Physical Disability: 0	
Secured Dementia Unit Capacity, If Applicable: 30		
Number of Residents Served in Secured Dementia Care Unit, If applicable: 16		
Number of Current Hospice Residents: 7		
Number of Hospice Residents in past year: 15		

Violation Report: 12841 - 01/28/2019 - Gray, Dean
 PCH Name: SUNRISE SENIOR LIVING OF DRESHER

1. REGULATION 55 Pa.Code §2600

2600.225(c) - The resident shall have additional assessments as follows:

- (1) Annually.
- (2) If the condition of the resident significantly changes prior to the annual assessment.
- (3) At the request of the Department upon cause to believe that an update is required.

2a. DESCRIPTION OF VIOLATION

The most recent assessment for resident #1 was completed on 01/15/19 with the following errors;
 The resident is assessed as safe around poisons. This is contrary to the resident's medical evaluation. The "Security" section of the home's assessment reads "I live in a secured neighborhood or have a diagnosis of dementia" with an option to answer yes or no. This response is marked as "No" but the resident does reside in the home's "Reminiscence" neighborhood.

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

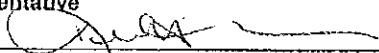
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

* please see attached.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)



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

Kervin Zudak Executive Director

Date

3/9/19

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

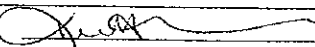
The above plan of correction is approved as of 3/25/19
 (Date)

Plan of correction implementation status as of 3/25/19
 (Date)

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

The above plan of correction was approved by AAA
 (Initials)

Sunrise Senior Living Plan of Correction

Name of Personal Care Home: Sunrise of Dresher
Address of PCH: 1650 Susquehanna Road Dresher, PA 19025
License number: #128410
Inspection date(s): January 28, 2019
Name/Title of Legal Entity Representative Signing the Plan of Correction:
Kerri H. Zwolak, Executive Director
Signature of Sunrise Representative: 
Date of Submission: 3/9/19

Regulation 55 Pa.Code § 2600.	Target Date by Which Correction will be completed	Plan of Correction
225(c)	3/5/19	After reviewing the Documentation of Medical Evaluation (DME) for Resident A and verifying its accuracy, a reassessment was completed and documented by the Resident Care Director (RCD), to reflect the resident's current status.
	3/22/19	An audit of all Service Evaluation and Health Assessments (RASP) for residents in the secured dementia unit was completed by the RCD and Wellness Nurses to determine the accuracy of the current assessments.
	3/4/19	The Executive Director reviewed the process with the RCD, Wellness Nurses, and care coordinator of checking completed Service Evaluation and Health Assessments to ensure their accuracy before finalizing the assessment.
	4/4/19	The POC will be discussed and evaluated (for up to 3 months) by the Executive Director and Coordinators at the Quality Management (QAPI) meeting to ensure it is still effective. If not effective it will be amended and a new POC and training will be implemented and monitored to ensure the violation does not occur again.

Responses on the enclosed plan of correction do not constitute an admission or agreement of the truth of the facts alleged or the conclusion set forth in the regulatory report. The responses are prepared solely as a matter of compliance with law.