



pennsylvania
DEPARTMENT OF HUMAN SERVICES

**Sent via e-mail licensing@sunriseseniorliving.com
Sent via e-mail dresher.ed@sunriseseniorliving.com
February 13, 2020**

Mr. Michael J. Stein
Authorized Person
HCRI Sun III Tenant, LP
Attn: *Menerva Philson*
7902 Westpark Drive
McLean, Virginia 22102

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

Dear Mr. Stein:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on December 18, 2019 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

Shawn Parker

Shawn Parker
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: *SUNRISE SENIOR LIVING OF DRESHER*

License Number: 12841

Address: *1650 SUSQUEHANNA ROAD,, DRESHER, PA 19025*

County: *MONTGOMERY*

Region: *SOUTHEAST*

Administrator

Name: *Brian Baxter*

Phone: *2152831123*

Email: *dresher.ed@SUNRISESENIORLIVING.COM*

Legal Entity

Name: *HCRI SUN III TENANT LP*

Address: *7902 WESTPARK DRIVE, ATTN: MENERVA PHILSON, MCLEAN, VA, 22102*

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0*

Total Daily Staff: *125*

Waking Staff: *94*

Inspection

Type: *Partial*

BHA Docket #:

Notice: *Unannounced*

Reason: *Complaint*

Inspection Dates and Department Representative

12/18/2019 - On-Site: Alexander Goldstein, Youn Chung

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *105*

Residents Served: *80*

Secured Dementia Care Unit

In Home: *Yes*

Area:

Capacity: *30*

Residents Served: *24*

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: *10*

Diagnosed with Intellectual Disability: *1*

Have Mobility Need: *45*

Have Physical Disability: *45*

60c - Housekeeping/Maintenance

Regulations

2600.

60.c. Additional staff hours, or contractual hours, shall be provided as necessary to meet the laundry, food service, housekeeping and maintenance needs of the home.

Description of Violation

On 12/18/19 the home had 2 full time housekeeping staff and 1 maintenance staff splitting time between maintenance and housekeeping duties. The home needs more housekeeping staff to ensure resident rooms and common areas are clean. The home has 3 floors and not enough housekeeping staff. Kitchens and hallways were observed messy. The laundry room had clothing and trash all over the floor.

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.....

Until full time housekeeper is hired, ED/designee will ensure maintenance needs of home are maintained to ensure sanitary conditions are upheld.

SP 01-21-2020

Legal Entity Representative

Brian Baxter
Signature

Brian Baxter ED
Printed Name and Title

1/8/2020
Date

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The above plan of correction is approved as of 01-21-2020
(Date)

Plan of correction implementation status as of 01-21-2020
(Date)

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

Implemented
 Not Implemented

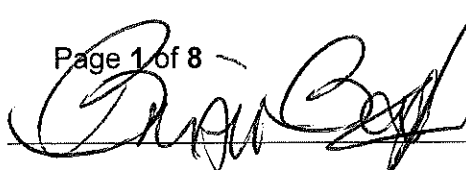
Sunrise Senior Living Plan of Correction

Name of Personal Care Home: Sunrise of Dresher
Address of PCH: 1650 Susquehanna Rd Dresher, PA 19025
License number: 128410
Inspection date(s): 12/18/2019
Name/Title of Legal Entity Representative Signing the Plan of Correction:
Sunrise Senior Living of Dresher
Signature of Sunrise Representative: Brian Baxter
Date of Submission: _____

Regulation 55 Pa.Code § 2600.	Target Date by Which Correction will be completed	Plan of Correction
2600.60.c	11/15/19	The full time Housekeeper resigned.
	12/18/19	A full time housekeeper/maintenance assistant has been assigned to focus on housekeeping until another full time housekeeper is hired.
	12/18/19	The ED/Designee perform random checks of common areas, kitchen areas, and bathrooms while completing walkthrough of the community.
	11/15/19	A job posting for a full time housekeeper was listed on employment websites.
	12/18/19	The 3 rd Floor housekeeper comes in later in the day (10:30am). While completing the walkthrough with the Department Inspectors on the day of the survey, the 3 rd floor housekeeper arrived for their shift and addressed/corrected all concerns.
	12/20/19	The Maintenance Coordinator provided all departments with the housekeeping schedule to ensure the community is aware of the schedule.
	1/30/20	The POC is discussed and evaluated (for up to 3 months) by the Executive Director (ED) 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 will be implemented and monitored to ensure the violation does not occur again.

Page 1 of 8

Signature of Sunrise Representative: _____



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.

82b - Poisonous Material Storage

Regulations

2600.

82.b. Poisonous materials shall be stored separately from food, food preparation surfaces and dining surfaces.

Description of Violation

A bottle of Diversey Virex TB, disinfectant cleaner, was stored with two bottles of syrup in an unlocked 3rd floor kitchen cabinet.

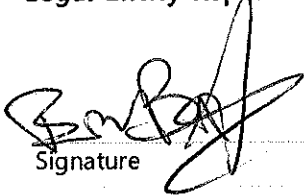
Plan of Correction (POC)

(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.....

Staff education, monitoring, and audits to be documented by home and made available for Department review.
SP 01-21-2020

Legal Entity Representative


Signature

Brian Baxter ED
Printed Name and Title

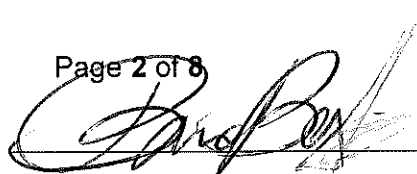
1/8/2020
Date

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The above plan of correction is approved as of	01-21-21-2020 (Date)	Plan of correction implementation status as of	01-21-2020 (Date)
The above plan of correction was approved by	SP (Initials)	<input checked="" type="checkbox"/> Implemented <input type="checkbox"/> Not Implemented	

Regulation 55 Pa.Code § 2600.	Target Date by Which Correction will be completed	Plan of Correction
2600.82.b	12/18/19	The chemical was removed and placed in a locked cabinet away from food by the Executive Director.
	12/18/19	The ED discussed with staff currently on the floor all chemicals need to be stored in a locked cabinet away from food.
	12/18/19 and ongoing	The ED/Designee will perform random checks of food storage areas to ensure they are free from chemicals and chemicals are in a secure location.
	12/30/19	The ED discussed with staff currently on the floor all chemicals need to be stored in a locked cabinet away from food during community Town hall meeting.
	1/30/20	The POC is discussed and evaluated (for up to 3 months) by the ED 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 will be implemented and monitored to ensure the violation does not occur again.

Signature of Sunrise Representative:



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82c - Locking Poisonous Materials

Regulations

2600.

82.c. Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

Description of Violation

A bottle of Diversey Virex TB, disinfectant cleaner, was stored in an unlocked 3rd floor kitchen cabinet.

Plan of Correction (POC)

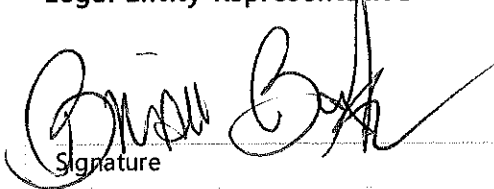
(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

Please see attached.....

Staff education, monitoring, and audits to be documented by home and made available for Department review. ED or designee will ensure all poisons are locked at all times.

SP 01-21-2020

Legal Entity Representative


Signature

Brian Baxter ED
Printed Name and Title

1/21/2020
Date

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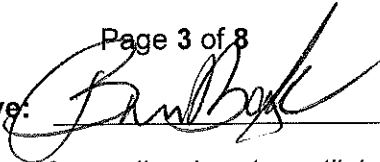
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(Initials)

Implemented
 Not Implemented

Regulation 55 Pa.Code § 2600.	Target Date by Which Correction will be completed	Plan of Correction
2600.82.c	12/18/19	The chemical was removed and placed in a locked cabinet away from food by the Executive Director
	12/18/19	The ED discussed with staff currently on the floor all chemicals need to be stored in a locked cabinet away from food.
	12/18/19 and ongoing	The ED/Designee will perform random checks of food storage areas to ensure they are free from chemicals and chemicals are in a secure location.
	12/30/19	The ED discussed with staff currently on the floor all chemicals need to be stored in a locked cabinet away from food during community Town hall meeting.
	1/30/20	The POC is discussed and evaluated (for up to 3 months) by the ED 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 will be implemented and monitored to ensure the violation does not occur again.

Signature of Sunrise Representative: _____



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85a - Sanitary Conditions

Regulations

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

The 1st floor main kitchen floor had dried food bits and dust. Food was smeared on the wall between the dishwasher and sink in the 3rd floor kitchen. The 3rd floor hallways needed to be vacuumed as there was a visual accumulation of dust and dirt. The laundry room had clothing and trash covering the floor.

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.....

ED or designee will ensure sanitary conditions are maintained throughout home at all times

SP 01-21-2020

Legal Entity Representative

[Handwritten Signature]
Signature

Brian Baux for ED
Printed Name and Title

1/8/2020
Date

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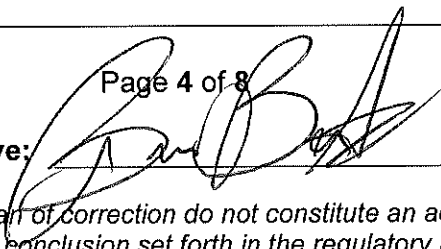
Plan of correction implementation status as of 01-21-2020
(Date)

- Implemented
- Not Implemented

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

Regulation 55 Pa.Code § 2600.	Target Date by Which Correction will be completed	Plan of Correction
2600.85.a	12/18/19	The ED spoke with care managers and housekeeping expressing the kitchen walls and floors need to be wiped after every service, the laundry room needs to be kept in a neat clean state and check throughout the day during rounds and areas were cleaned.
	12/18/19	The ED discussed expectations with staff currently on the floor.
	12/18/19	The ED/Designee perform random checks of common areas, kitchen areas, and bathrooms while completing walkthrough of the community.
	12/30/19	The ED reviewed expressing the kitchen walls and floors need to be wiped after every service, the laundry room needs to be kept in a neat clean state and check throughout the day during rounds during community Town hall.
	1/30/20	The POC is discussed and evaluated (for up to 3 months) by the ED 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 will be implemented and monitored to ensure the violation does not occur again.

Signature of Sunrise Representative: _____



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85d - Trash Receptacles

Regulations

2600.

85.d. Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

Description of Violation

Trash cans in the 3rd floor dining area and the 2nd floor bathroom did not have lids or covering.

Plan of Correction (POC)

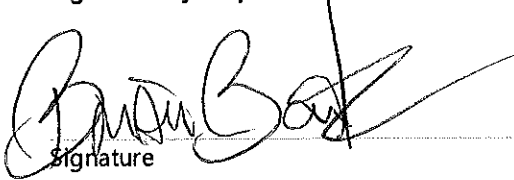
(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

Please see attached.....

ED or designee will ensure all trashcans in kitchens and bathrooms have lids and are covered when not in use. Audits to be maintained by home and kept for Department review

SP 01-21-2020

Legal Entity Representative


Signature

Brian Baxter ED
Printed Name and Title

1/21/2020
Date

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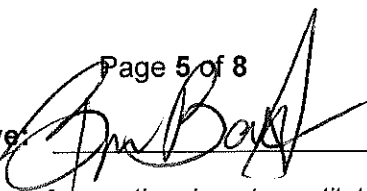
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 Not Implemented

Regulation 55 Pa.Code § 2600.	Target Date by Which Correction will be completed	Plan of Correction
2600.85.d	12/18/19	The ED removed the trash cans found on the 3 rd floor dining area and the 2 nd floor bathroom.
	12/18/19	Maintenance Coordinator located the lid for the trashcan and covered the trashcan
	12/20/19	An audit of the kitchen and bathroom trash cans was completed by the Maintenance Coordinator and all trash cans in need of being replaced were ordered.
	12/24/19	All trash cans in need of replacing for kitchen and bathrooms have been corrected and now have lids.
	12/18/19 ongoing	The ED/designee performs random audits while completing walkthrough of community to verify the kitchen and bathroom trash cans are the correct ones.
	1/30/20	The POC is discussed and evaluated (for up to 3 months) by the ED 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 will be implemented and monitored to ensure the violation does not occur again.

Signature of Sunrise Representative: _____



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101j5 - Bedside Table/Shelf

Regulations

2600.

101.j. Each resident shall have the following in the bedroom:

5. A bedside table or a shelf.

Description of Violation

There is no bedside table or shelf beside resident #1's bed in bedroom 321.

Plan of Correction (POC)

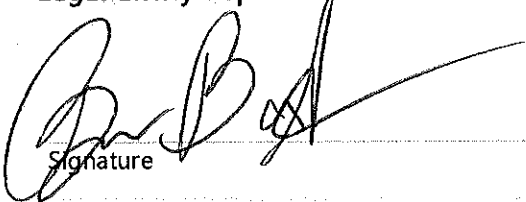
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Please see attached.....

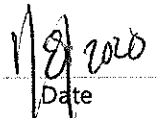
A designated staff person shall check the home at least weekly to ensure all resident beds have a bedside table or shelf.

SP 01-21-2020

Legal Entity Representative


Signature


Printed Name and Title


Date

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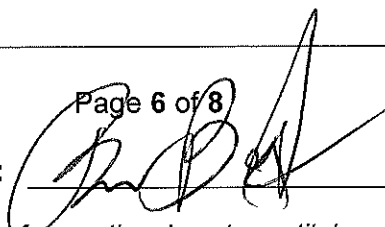
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(Initials)

Implemented
 Not Implemented

Regulation 55 Pa.Code § 2600.	Target Date by Which Correction will be completed	Plan of Correction
2600.101.j.5	12/18/19	The Maintenance Coordinator placed a shelf at bedside for resident #1.
	12/20/19	An audit was performed by the Maintenance Coordinator to ensure all residents have access to a bedside table or shelf in their rooms.
	12/20/19	MC will ensure all rooms that are room ready will have all state required furniture in the room prior to the move-in.
	12/20/19	The ED/designee performs random audits while completing walkthrough of community to ensure rooms have all necessary furniture.
	1/30/20	The POC is discussed and evaluated (for up to 3 months) by the ED 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 will be implemented and monitored to ensure the violation does not occur again.

Signature of Sunrise Representative: _____



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101j7 - Lighting/Operable Lamp

Regulations

2600.

101.j. Each resident shall have the following in the bedroom:

- 7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

Resident #1 does not have access to a source of light that can be turned on/off at bedside.

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.....

A designated staff person shall check the home at least weekly to ensure all resident beds have an operable bedside lamp or source of lighting that can be turned on/off from bedside.

SP 01-21-2020

Legal Entity Representative

[Handwritten Signature]
Signature

Brian Beuth ED
Printed Name and Title

1/8/2020
Date

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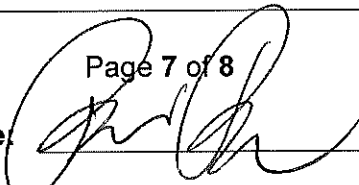
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- Implemented
- Not Implemented

Regulation 55 Pa.Code § 2600.	Target Date by Which Correction will be completed	Plan of Correction
2600.101.j.7	12/18/19	The Maintenance Coordinator placed a push light that is accessible at bedside for resident #1.
	12/20/19	An audit was performed by the Maintenance Coordinator to ensure all residents have access to an operable lamp or other source of lighting that can be turned on at bedside.
	12/20/19	MC will ensure all rooms that are room ready will have all state required furniture in the room prior to the move-in.
	12/20/19	The ED/designee performs random audits while completing walkthrough of community to verify that each resident has an operable lamp or other source of lighting that can be turned on at bedside.
	1/30/20	The POC is discussed and evaluated (for up to 3 months) by the ED 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 will be implemented and monitored to ensure the violation does not occur again.

Signature of Sunrise Representative: _____



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103g - Storing Food

Regulations

2600.

103.g. Food shall be stored in closed or sealed containers.

Description of Violation

There were 7 ice cream pails in the ice cream freezer. 4 of the ice cream pails were not covered. There was also a tray of loose beans on one of the dry goods shelves that was not covered.

Plan of Correction (POC)

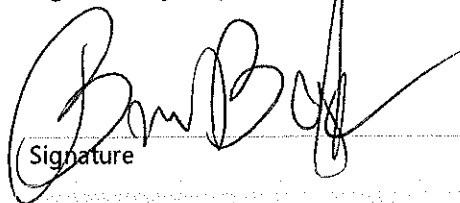
(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

Please see attached.....

Immediately – The Dietary Director will check all food storage areas to ensure all food is stored in closed or sealed containers.

SP 01-21-2020

Legal Entity Representative


(Signature)

Brian Bayliss ED
Printed Name and Title

1/9/2020
Date

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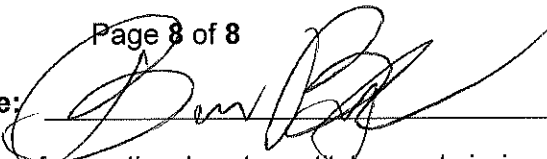
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Implemented
 Not Implemented

Regulation 55 Pa.Code § 2600.	Target Date by Which Correction will be completed	Plan of Correction
2600.103.g	12/18/19	The ED placed lids on the four ice cream pails and cleaned beans off of the tray in the dry goods shelves.
	12/18/19	The Dining Service Coordinator ordered plastic lids for the ice cream pails so that the stay intact and can be easily secured on the pails.
	12/18/19	The DSC/designee verifies after each food service that all food is stored away in sealed.
	12/30/19	The ED reviewed with team all food is expected to be stored in a covered container during community Town hall.
	1/30/20	The POC is discussed and evaluated (for up to 3 months) by the ED 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 will be implemented and monitored to ensure the violation does not occur again.

Signature of Sunrise Representative: _____



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