

Department of Human Services
Bureau of Human Service Licensing

June 22, 2021

[REDACTED] INTERIUM ED
AL ONE PA INVESTMENTS OPCO LLC
500 N HURSTBOURNE PKWY,STE 200
LOUISVILLE, KY 40222

RE: SUNRISE OF WESTTOWN
1045 WILMINGTON PIKE
WEST CHESTER, PA, 19382
LICENSE/COC#: 14494

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/12/2021, 05/11/2021, 05/06/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Patricia Adams

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Inspections / Reviews

05/12/2021 - Partial

Lead Inspector: [REDACTED]

Follow Up Type: *POC Submission*

Follow-Up Date: *05/24/2021*

6/8/2021 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *06/15/2021*

6/22/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42I - Personal Clothing

1. Requirements

2600.

42.I. A resident has the right to furnish his room and purchase, receive, use and retain personal clothing and possessions.

Description of Violation

Resident #1 died on [REDACTED] and as of 5/11/21, the resident's Hoyer Lift has not been returned to the medical supplier despite multiple attempts to communicate with the home by the family.

Plan of Correction

Accept

The facility was alerted on 5/11/21 that the hoyer lift for resident #1, who has since moved out, remained in the facility. The Resident Care Director immediately went to the former resident's room and contacted the durable medical company to obtain the hoyer lift from the facility. The hoyer lift was picked up on 5/12/21. The Resident Care Director and Personal Care Coordinator conducted a review of all vacant resident rooms to ensure no pieces of durable medical equipment were located in any vacant rooms. No pieces of equipment were identified. The ED reviewed need to contact durable medical equipment companies immediately upon a resident moving out of the facility with the RCD and PCC, as well as Maintenance Coordinator (MC). The MC and/or designees will conduct daily walk through to ensure no unused medical equipment remains in facility. 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.

Completion Date: 05/27/2021

Document Submission

Implemented

Receipt of equipment attached

44e - Complaint Submission

1. Requirements

2600.

44.e. Within 2 business days after the submission of a written complaint, a status report shall be provided by the home to the complainant. If the resident is not the complainant, the resident and the resident's designated person shall receive the status report unless contraindicated by the support plan. The status report must indicate the steps that the home is taking to investigate and address the complaint.

Description of Violation

On March 24, 2021, a written complaint regarding the failure of the home to return a prescribed Hoyer Lift was filed in the home. The home did not respond to the complaint or return the Hoyer Lift until May 12, 2021.

44e - Complaint Submission (continued)

Plan of Correction**Accept**

The Executive Director responded to the family of resident #1 via email and phone stating the hooyer lift had been returned to the durable medical equipment company. The facility did not previously have record of receiving a written grievance from the family.

A written complaint could not be located in the facility. The Executive Director reviewed mail receipt process with concierge and business office staff members.

The ED provided training to RCD and PCC on response requirements for a written complaint per DHS 2600 regulations.

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.

Completion Date: 05/27/2021

Document Submission**Implemented**

Reciept of pick up of equipment attached