



Sent via e-mail [REDACTED]

August 16, 2022

[REDACTED]
SZR Granite Run AL OPCO, LLC
[REDACTED]
[REDACTED]
[REDACTED]

RE: Sunrise of Granite Run
247 North Middleton Road
Media, Pennsylvania 19063
License #: 14490

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on May 17, 2021 of the above facility, we have determined that your submitted plan of correction is not fully implemented. Continued compliance must be maintained.

Sincerely,

[REDACTED]

[REDACTED]

Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

**Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC**

Facility Information

Name: SUNRISE OF GRANITE RUN **Licen e #:** 14490 **Licen e Expiration Date:** 01/01/2022
Addr e : 247 NORTH MIDDLETOWN ROAD, MEDIA, PA 19063
County: DELAWARE **Region:** SOUTHEAST

Administrator

Name: [REDACTED] **Phone:** [REDACTED] **Email:** [REDACTED]

Legal Entity

Name: SZR GRANITE RUN AL OPCO LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-2 **Date:** 09/09/1998 **Issued By:** Township of Middletown

Staffing Hours

Re ident Support Staff: 0 **Total Daily Staff:** 128 **Waking Staff:** 96

Inspection

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 05/17/2021

Inspection Dates and Department Representative

05/17/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 115 **Residents Served:** 70

Secured Dementia Care Unit

In Home: Yes **Area:** REM **Capacity:** 38 **Residents Served:** 24

Hospice

Current Residents: xx

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Year of Age or Older:** 70
Diagno ed with Mental Illne : 3 **Diagno ed with Intellectual Di ability:** 2
Have Mobility Need: 58 **Have Phy ical Di ability:** 0

Inspections / Reviews

05/17/2021 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 06/17/2021

Inspections / Reviews *(continued)*

6/21/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow Up Type: *Document Submission*

Follow-Up Date: *06/25/2021*

42c - Treatment of Residents

1. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

On [REDACTED]/2021 around [REDACTED] AM, resident #1 needed help with [REDACTED] bowel incontinence care. Staff A changed the resident on the bed. When the staff member was at the door to leave [REDACTED] room, the resident felt another bowel movement and asked for additional assistance. The staff member got mad and asked if the resident would like to sit on the toilet and shit to avoid another accident, which made the resident feel belittled.

Plan of Correction

Accept

2600.42c.

On [REDACTED] 21, resident #1 reported staff person A did not speak to resident #1 in a respectful manner. Staff person A was placed on administrative immediately. Upon completion of the investigation, staff person was provided retraining on residents' rights.

The department coordinators conducted training with all staff members regarding residents' rights.

The ED reviewed and reinforced residents' rights training at the monthly Town Hall Meetings.

ED and coordinators will conduct daily observations to ensure staff members are treating residents with dignity and respect.

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: 06/17/2021 Licensee's Proposed Date of POC Implementation

Not Implemented 8/16/22 CM

85a - Sanitary Conditions

1. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

On [REDACTED]/2021 at [REDACTED] AM, the exterior of the toilet bowl in resident #1's bathroom was streaked with feces, which was still not cleaned at [REDACTED] PM.

85a - Sanitary Conditions (continued)**Plan of Correction****Accept**

2600.85a-Personal Care Coordinator (PCC) cleaned exterior of toilet bowl in resident #1's bathroom.

The PCC and housekeeping team checked each resident's bathroom to ensure each room was clean with no concern regarding sanitary conditions. No issues were identified.

PCC and Reminiscence Coordinator (RC) provided retraining to all care managers regarding daily attention to cleanliness of resident rooms and maintaining sanitary conditions.

PCC, RC, and lead care managers will be responsible for conducting daily walk through of resident rooms to ensure sanitary conditions are maintained. Housekeeping services will continue for each resident weekly and as needed.

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 will be implemented and monitored to ensure the violation does not occur again.

Completion Date: 06/17/2021 Licensee's Proposed Date of POC Implementation

Not Implemented 8/16/22 CM

227g -Support Plan Signatures**1. Requirements**

2600.

227.g. Individuals who participate in the development of the support plan shall sign and date the support plan.

Description of Violation

The home updated resident #1's support plan on [REDACTED]/2021 but could not provide the signature page for this update.

Plan of Correction**Accept**

2600.227.g Requirement of documentation of individuals participating in development of support plans was reviewed at time of inspection with Personal Care Coordinator.

The Personal Care Coordinator (PCC) met with resident #1 to review support plan and obtain signatures.

The PCC and RC will complete an audit of all resident records to confirm if a support plan signature page is in place or needed. Resident/family meetings will be arranged and documented as necessary.

The ED or designee will review/signature of ISPs that have been completed within the last 7 days at weekly meeting to ensure support plan meetings are completed or scheduled and that support plan signature page is in place.

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 will be implemented and monitored to ensure the violation does not occur again.

Completion Date: 06/17/2021 Licensee's Proposed Date of POC Implementation

Implemented 8/16/22 CM