

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

January 18, 2023

[REDACTED]
HCRI SUN III TENANT LP
[REDACTED]
[REDACTED]

RE: SUNRISE SENIOR LIVING OF
DRESHER
1650 SUSQUEHANNA ROAD
DRESHER, PA, 19025
LICENSE/COC#: 12841

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/24/2022, 01/25/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: SUNRISE SENIOR LIVING OF DRESHER **License #:** 12841 **License Expiration:** 03/06/2023
Address: 1650 SUSQUEHANNA ROAD, DRESHER, PA 19025
County: MONTGOMERY **Region:** SOUTHEAST

Administrator

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

Legal Entity

Name: HCRI SUN III TENANT LP

Address: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-1 **Date:** 04/15/2006 **Issued By:** Twp of Upper Dublin

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 96 **Waking Staff:** 72

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 01/24/2022

Inspection Dates and Department Representative

01/24/2022 - On-Site: [REDACTED]

01/25/2022 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 105 **Residents Served:** 60

Secured Dementia Care Unit

In Home: Yes **Area:** reminiscence **Capacity:** 30 **Residents Served:** 21

Hospice

Current Residents: 4

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 58
Diagnosed with Mental Illness: 3 **Diagnosed with Intellectual Disability:** 3
Have Mobility Need: 36 **Have Physical Disability:** 0

Inspections / Reviews

01/24/2022 - Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 03/05/2022

Inspections / Reviews *(continued)*

12/05/2022 - POC Submission

Submitted By: [REDACTED] Date Submitted: 03/02/2022

Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 12/12/2022

01/18/2023 - Document Submission

Submitted By: [REDACTED] Date Submitted: 12/05/2022

Reviewer: [REDACTED] Follow-Up Type: Not Required

141b1 - Annual Medical Evaluation

1. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation*Resident 1's most recent medical evaluation was completed [REDACTED]/20.***POC Submission****Accept***3/30/22-An audit of resident files was completed to verify that residents have a medical evaluation (DME) completed at least annually. A DME was obtained for residents that required an annual evaluation.**1/24/22-A tickler will be used to track when DME's are due.**3/15/22-The Executive Director (ED) will train the Resident Care Director (RCD) and the Wellness nurses on the process of using the tickler, notification and obtaining a DME.**1/25/22-The RCD or designee report weekly at the stand-up meeting which residents are due for a new DME. Once the DME is obtained the RCD or designee will review the contents to verify it has been completed in their entirety and timely.**3/19/22-During the monthly QAPI meeting, the ED and Coordinators will review the POC for up to 3 months. If the POC is not effective, it will be amended and new POC will be implemented and monitored to ensure incident does not occur again.*

Licensee's Plan Completion Date: 03/30/2022

Implemented [REDACTED] - 12/06/2022)

233c - Key-Locking Devices

2. Requirements

2600.

233.c. If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

Description of Violation*The directions for operating the home's locking mechanism are not conspicuously posted near the elevator to the Secure Dementia Care Unit (SDCU).***POC Submission****Accept***1/24/24-The directions on how to open the elevator door was posted in conspicuously near the elevator door.**1/24/24-All doors with a magnetic locking device entering and exiting the Secured Dementia Care Unit (SDCU)*

233c - Key-Locking Devices (continued)

were checked to verify instructions for use were conspicuously posted.

1/24/24-The ED and leadership team check to ensure door codes and instructions in the SDCU remain posted in a conspicuous area during daily rounds.

3/9/22-During the monthly QAPI meeting, the ED and Coordinators will review the POC for up to 3 months. If the POC is not effective, it will be amended and new POC will be implemented and monitored to ensure incident does not occur again.

Licensee's Plan Completion Date: 03/09/2022

Implemented [REDACTED] - 12/30/2022)