

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

May 1, 2023

[REDACTED]
WELLTOWER OPCO GROUP LLC
[REDACTED]
[REDACTED]

RE: SUNRISE OF NEWTOWN SQUARE
333 SOUTH NEWTOWN STREET
ROAD
NEWTOWN SQUARE, PA, 19073
LICENSE/COC#: 14326

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/18/2023 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 OF NEWTOWN SQUARE* License #: *14326* License Expiration: *12/15/2023*
 Address: *333 SOUTH NEWTOWN STREET ROAD, NEWTOWN SQUARE, PA 19073*
 County: *DELAWARE* Region: *SOUTHEAST*

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: *WELLTOWER OPCO GROUP LLC*
 Address: [Redacted]
 Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Type: *C 2 LP* Date: *01/20/2004* Issued By: *Commonwealth of PA, L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *84* Waking Staff: *63*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint* Exit Conference Date: *04/18/2023*

Inspection Dates and Department Representative

04/18/2023 On Site [Redacted]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *104* Residents Served: *57*

Secured Dementia Care Unit
 In Home: *Yes* Area: *Reminiscence* Capacity: *26* Residents Served: *18*

Hospice
 Current Residents: *15*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *57*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *27* Have Physical Disability: *0*

Inspections / Reviews

04/18/2023 - Partial
 Lead Inspector: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *05/06/2023*

04/28/2023 - POC Submission
 Submitted By: [Redacted] Date Submitted: *05/01/2023*
 Reviewer: [Redacted] Follow-Up Type: *Document Submission* Follow-Up Date: *05/01/2023*

Inspections / Reviews *(continued)*

05/01/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/01/2023

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

162c - Menus Posted

1. Requirements

2600.

162.c. Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

Description of Violation

The home's menus for the current week of 04/16/23 to 04/22/23 were posted in the home's two elevators. However, no additional menus were posted in these areas.

The menu's posted in the SDCU (Reminiscence Unit) dining room did not have the current week's menu visible.

On 04/18/23, at 9:41 am, the daily menu board in the main dining room listed the lunch and dinner menus for the previous day; Monday, April 17, 2023.

Plan of Correction**Accept** [REDACTED] - 04/28/2023)

On 4/18/23 at the time of the inspection, the Executive Director (ED) posted the current week's menu along with the following week's menu in the Personal Care and Reminiscence dining areas and updated the dining area's daily menus to the current date.

On 4/18/23, the ED gave a training session on posting the current and upcoming menus weekly to the Dining Service Coordinator (DSC) and the Reminiscence Coordinator (RC).

Starting on 4/18/23, the ED, DSC, RC and/or designee will confirm the one-week advance menu is posted in the Personal Care and Reminiscence dining areas.

Starting on 4/18/23, the ED, DSC, RC and/or designee will review the menu boards daily to make sure the current day's menu is posted.

Starting May 18, 2023, and for the next three months, during the monthly Quality Assurance and Performance Improvement (QAPI/Quality Management) meeting the ED and Coordinators will review the Plan of Correction (POC) to determine if 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.

Licensee's Proposed Overall Completion Date: 04/27/2023

Implemented [REDACTED] - 05/01/2023)