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

June 14, 2023

[redacted], REGIONAL DIRECTOR OF OPERATIONS
WELLTOWER OPCO GROUP LLC
[redacted]

RE: SUNRISE OF LAFAYETTE HILL
429 RIDGE PIKE
LAFAYETTE HILL, PA, 19444
LICENSE/COC#: 14324

Dear [redacted],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/20/2023 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 LAFAYETTE HILL* **License #**: *14324* **License Expiration**: *12/15/2023*

Address: *429 RIDGE PIKE, LAFAYETTE HILL, PA 19444*

County: *MONTGOMERY* **Region**: *SOUTHEAST*

Administrator

Name: [redacted] **Phone**: [redacted] **Email**: [redacted]

Legal Entity

Name: *WELLTOWER OPCO GROUP LLC*

Address: [redacted]

Certificate(s) of Occupancy

Type: *I-2* **Date**: *06/18/1998* **Issued By**: *Whitemarsh Township*

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff**: *85* **Waking Staff**: *64*

Inspection Information

Type: *Partial* **Notice**: *Unannounced* **BHA Docket #**:

Reason: *Complaint* **Exit Conference Date**: *04/20/2023*

Inspection Dates and Department Representative

04/20/2023 - On-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *105* **Residents Served**: *52*

Secured Dementia Care Unit

In Home: *Yes* **Area**: *Reminiscence* **Capacity**: *25* **Residents Served**: *18*

Hospice

Current Residents: *14*

Number of Residents Who:

Receive Supplemental Security Income: *0*

Are 60 Years of Age or Older: *52*

Diagnosed with Mental Illness: *0*

Diagnosed with Intellectual Disability: *0*

Have Mobility Need: *33*

Have Physical Disability: *3*

Inspections / Reviews

04/20/2023 Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *05/14/2023*

05/16/2023 - POC Submission

Submitted By: [redacted] **Date Submitted**: *06/13/2023*

Reviewer: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *05/21/2023*

Inspections / Reviews *(continued)*

05/16/2023 POC Submission

Submitted By: [redacted] **Date Submitted:** *06/13/2023*

Reviewer: [redacted] **Follow Up Type:** *Document Submission* **Follow Up Date:** *05/31/2023*

06/14/2023 Document Submission

Submitted By: [redacted] **Date Submitted:** *06/13/2023*

Reviewer: [redacted] **Follow Up Type:** *Not Required*

82c - Locking Poisonous Materials

1. Requirements

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

Revlon New Complexion One Step Compact Make up, with a manufacture's label indicating "If product is swallowed , get medical help or contact Poison Control Center right away", was unlocked, unattended, and accessible to resident # #1. Not all the residents of the home, including resident#1, have been assessed capable of recognizing and using poisons safely.

Plan of Correction ***Accept ([redacted] - 05/16/2023)***

Upon discovery, the Revlon Makeup Compact was immediately secured in the resident's locked drawer in the suite by the Reminiscence Care Coordinator.

The Executive Director (ED) and Reminiscence Supervisor immediately conducted an audit of all bedrooms and common area spaces to ensure all poisonous materials were secured.

The ED provided training to all team members on the requirement for poisonous materials to be kept secured and which soap was permitted to be unlocked and unattended in a secured dementia care unit (SDCU) at the Town Hall meeting on 4/26/2023.

The Reminiscence Supervisor and/or designee will conduct a daily walk through of the SDCU to ensure all poisonous materials are secured. Walk throughs of the neighborhood began immediately on 4/20/2023 and will continue through 6/30/2023. Any findings will be corrected immediately and team members on shift will be addressed at the time of discovery.

The POC and monitoring process will be discussed during monthly QAPI meetings for 3 months by the Executive Director and/or Resident Care Director. If not effective, it will be amended and new POC will be implemented and monitored to ensure incident does not occur again.

Licensee's Proposed Overall Completion Date: *06/30/2023*

Implemented [redacted] - 06/14/2023)