

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

January 3, 2025

[REDACTED]
SZR HAVERFORD AL OPCO LLC

[REDACTED]
ATTN LICENSING
[REDACTED]

RE: SUNRISE OF HAVERFORD
217 WEST MONTGOMERY AVENUE
HAVERFORD, PA, 19041
LICENSE/COC#: 14492

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/26/2024 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 HAVERFORD **License #:** 14492 **License Expiration:** 01/01/2025

Address: 217 WEST MONTGOMERY AVENUE, HAVERFORD, PA 19041

County: MONTGOMERY **Region:** SOUTHEAST

Administrator

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

Legal Entity

Name: SZR HAVERFORD AL OPCO LLC

Address: [REDACTED]

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

Certificate(s) of Occupancy

Type: C 2 LP **Date:** 03/04/1997 **Issued By:** CWOPA L&I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 87 **Waking Staff:** 65

Inspection Information

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

Reason: Complaint, Incident **Exit Conference Date:** 11/26/2024

Inspection Dates and Department Representative

11/26/2024 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 98 **Residents Served:** 51

Secured Dementia Care Unit

In Home: Yes **Area:** Reminensense **Capacity:** 25 **Residents Served:** 16

Hospice

Current Residents: 9

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 51

Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 1

Have Mobility Need: 36 **Have Physical Disability:** 0

Inspections / Reviews

11/26/2024 - Partial

Lead Inspector: [REDACTED] **Follow Up Type:** POC Submission **Follow Up Date:** 12/26/2024

Inspections / Reviews *(continued)*

12/30/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/02/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 01/02/2025

01/03/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/02/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

42c Treatment of Residents

1. Requirements

2600.

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

Description of Violation

On [REDACTED], at approximately 1:55 am, staff person A can be seen on video footage in resident [REDACTED] room transferring the resident incorrectly. Staff person A walked into the residents room without saying anything and just lifts the resident up by placing their hands under the residents arms and carries the resident approximately 6 feet and sits them in their wheelchair. Resident [REDACTED] can be heard asking "wait", "what is the matter", "what is happening". Staff person A is then seen on video getting resident [REDACTED]'s blanket from their bed and attempting to place it on the resident while in their wheelchair, the blanket falls to the floor. Staff person A then picks up the blanket and places it over resident [REDACTED] head. The resident then asks, "what are you doing", and then states "I can't see". Staff person A then takes resident [REDACTED] to the living room of the home and leaves them there. Resident [REDACTED] was ok with being left there and did not ask to return to their room until later in the morning at approximately 8:00 am. The staff person was terminated.

Plan of Correction

Accept [REDACTED] - 12/30/2024)

42. c

On [REDACTED] Staff member A was immediately placed on administrative leave pending investigation. Team member has been terminated. On [REDACTED] LPN completed a full body assessment on resident and resident remained at baseline with no changes per assessment.

On [REDACTED] senior resident care director interviewed other residents on staff member A assignment to ensure they are being treated with dignity and respect. LPN conducted full body assessments on other residents on staff member A assignments and all residents remained at baseline.

On [REDACTED] Executive Director/ Senior RCC conducted a training for care staff on properly approaching residents and treating all residents with dignity and respect to remain in compliance with 2600.42c

The POC and monitoring results will be reviewed and evaluated by the ED and Coordinators at the QAPI meeting for 2 quarters beginning on [REDACTED] to that it is still effective. If it is no longer effective it will be amended and a new POC will be implemented and monitored to ensure the violation does not occur again.

Proposed Overall Completion Date: 12/26/2024

Licensee's Proposed Overall Completion Date: 12/26/2024

Implemented ([REDACTED] 01/03/2025)

231c Preadmission Screening

2. Requirements

2600.

231.c. A written cognitive preadmission screening completed in collaboration with a physician or a geriatric assessment team and documented on the Department's preadmission screening form shall be completed for each resident within 72 hours prior to admission to a secured dementia care unit.

Description of Violation

Resident [REDACTED] was admitted to the Secure Dementia Care Unit (SDCU) on [REDACTED]. However, the resident [REDACTED] written cognitive preadmission screening was completed on [REDACTED].

231c - Preadmission Screening (continued)

Plan of Correction

Accept ([redacted] - 12/30/2024)

231 c

Wellness nurse conducted an audit of the cognitive screenings to ensure that all residents who reside in the secured dementia care unit had a cognitive screen within 72 hours prior to admission to the secured dementia unit.

On [redacted] executive Director/ Senior resident care director educated wellness nurses on how to complete cognitive screen according to regulation 231.c ensuring that all residents admitted to the secured dementia care unit have a cognitive screen within 72 hours prior to admission to the secured dementia unit.

Executive Director will review new move-ins for residents who transfer to the secure dementia neighborhood weekly for two months to ensure that the cognitive screens are completed within 72 hours prior to admission to the secured dementia unit.

The POC and monitoring results will be reviewed and evaluated by the ED and Coordinators at the QAPI meeting for 2 quarters beginning on [redacted] to that it is still effective. If it is no longer effective it will be amended and a new POC will be implemented and monitored to ensure the violation does not occur again.

Proposed Overall Completion Date: 12/26/2024

Licensee's Proposed Overall Completion Date: 12/26/2024

Implemented [redacted] 01/03/2025)