

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

September 24, 2026

[REDACTED]
SUNNY CREST HOME INC
[REDACTED]
[REDACTED]

RE: SUNNY CREST HOME
2587 VALLEY VIEW ROAD
MORGANTOWN, PA, 19543
LICENSE/COC#: 32192

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/02/2026, 09/03/2026 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: SUNNY CREST HOME **License #:** 32192 **License Expiration:** 02/25/2027
Address: 2587 VALLEY VIEW ROAD, MORGANTOWN, PA 19543
County: LANCASTER **Region:** CENTRAL

Administrator

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

Legal Entity

Name: SUNNY CREST HOME INC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 08/05/2007 **Issued By:** Department of Labor and Industry

Staffing Hours

Resident Support Staff: **Total Daily Staff:** 56 **Waking Staff:** 42

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint, Fine **Exit Conference Date:** 09/03/2026

Inspection Dates and Department Representative

09/02/2026 - On-Site: [REDACTED]
09/03/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 71 **Residents Served:** 51

Secured Dementia Care Unit

In Home: No **Area:** **Capacity:** **Residents Served:**

Hospice

Current Residents: 2

Number of Residents Who:

Receive Supplemental Security Income: 26 **Are 60 Years of Age or Older:** 30
Diagnosed with Mental Illness: 17 **Diagnosed with Intellectual Disability:** 22
Have Mobility Need: 5 **Have Physical Disability:** 2

Inspections / Reviews

09/02/2026 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 09/25/2026

Inspections / Reviews (*continued*)

09/23/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/24/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 09/25/2026

09/24/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/24/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

16c Written Incident Report**1. Requirements**

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On [REDACTED] at 6:35PM, Resident [REDACTED] was yelling and when staff tried to redirect the resident away from Resident [REDACTED] Resident [REDACTED] hit Resident [REDACTED] The home did not report this incident to the Department until [REDACTED]

Repeated Violation - [REDACTED], et al

Plan of Correction**Accept [REDACTED] 09/23/2026)**

The staff person will be re-educated on the importance of reporting abuse in 24 hour, Administrator will audit all reports weekly for 3 months
see attached

Licensee's Proposed Overall Completion Date: 09/17/2026

Implemented [REDACTED] - 09/24/2026)**225c Additional Assessment****2. Requirements**

2600.

225.c. The resident shall have additional assessments as follows:

2. If the condition of the resident significantly changes prior to the annual assessment.

Description of Violation

Resident [REDACTED] assessment, dated [REDACTED], did not include the resident's medical diagnoses including [REDACTED], [REDACTED], and [REDACTED] as diagnosed during the resident's medical evaluation completed on [REDACTED]

Repeated Violation - [REDACTED], et al

Plan of Correction**Accept [REDACTED] - 09/23/2026)**

The assessment was updated 9/15/2026 by the Administrator and re-educated the Admin Staff on 9/16/2026 -the importance of proper documentation procedures. Administrator will continue to audit the assessment for any changes every month for 3 months

Licensee's Proposed Overall Completion Date: 09/16/2026

Implemented [REDACTED] 09/24/2026)