



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: March 21, 2016

Mr. Mark W. Ohlendorf, President
Emeritus Corporation
6737 West Washington Street
Suite 2300
Milwaukee, Wisconsin 53214

RE: Brookdale Grandon Farms
1100 Grandon Way
Mechanicsburg, Pennsylvania 17055
Certificate #: 316120

Dear Mr. Ohlendorf:

As a result of the Department of Human Services' licensing inspection on January 8, 2016 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

The violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

Brett Swanger
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2800

PCH Name: BROOKDALE GRANDON FARMS		License Number: 31812
Address: 1100 GRANDON WAY, MECHANICSBURG, PA 17055		County: Cumberland
Administrator: S. Denny Granahan		Region: CENTRAL
Legal Entity Name: EMERITUS CORPORATION		
Legal Entity Address: 3131 ELLIOTT AVENUE STE. 600, SEATTLE, WA 98121		
Certificate(s) of Occupancy C-2 LP 03/15/2005 Labor & Industry		
Staffing Hours Resident Support: 0 Total Daily Staff: 125 Waking Staff: 94		
Type of Inspection: Partial BHA Docket Number: Notice: Unannounced		
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 01/08/2016: McCloskey, Jason		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details Partial or Full Triggers: Random Indicators:		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 120 Number of Residents Served: 91 Secured Dementia Care Unit in Home: Yes Area: Memory Care Unit Secured Dementia Unit Capacity, if Applicable: 30 Number of Residents Served in Secured Dementia Care Unit, if applicable: 28 Number of Current Hospice Residents: 8 Number of Hospice Residents in past year: 10	Number of Residents who: Receive Supplemental Security Income: 1 Are 60 Years of Age or Older: 91 Have Mental Illness: 3 Have an Intellectual Disability: 0 Have a Mobility Need: 34 Have a Physical Disability: 8	

Violation Report: 31812 - 01/08/2016 - McCloskey, Jason
 PCH Name: BROOKDALE GRANDON FARMS

1. REGULATION 55 Pa.Code §2800

2800.227(d) - Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services.

2a. DESCRIPTION OF VIOLATION

Mental Health Nursing Services were provided to Resident 1 by an outside nursing agency following an incident which occurred on 11-1-15. These services were not documented on the resident's support plan.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

See attached Document

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BAS 3/21/16

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *S. Denny Granahan Executive Director* Date *3/17/2016*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 3/21/16
 (Date)

The above plan of correction was approved by BAS
 (Initials)

Plan of correction implementation status as of 3/21/16
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Brookdale at Grandon Farms

Plan of Correction

The following is the Plan of Correction for Brookdale at Grandon Farms regarding the Statement of Deficiency dated March 7, 2016 for the incident follow-up survey January 8, 2016. This Plan of Correction is not to be construed as an admission of or agreement with the findings and conclusions in the Statement of Deficiencies, or any related sanction or fine. Rather, it is submitted as confirmation of our ongoing efforts to comply with statutory and regulatory requirements. In this document, we have outlined specific actions in response to identified issues. We have not provided a detailed response to each allegation or finding, nor have we identified mitigating factors. We remain committed to the delivery of quality health care services and will continue to make changes and improvement to satisfy that objective.

Regulation 2600.227(d)

Mental Health Nursing Services were provided to resident #1 by an outside nursing Agency following an incident which occurred on 11-1-15. These services were not documented on the resident's support plan.

Immediately – The residents support plan was updated to reflect the mental health services received by the resident.

Immediately – The Executive Director re-trained the appropriate staff on monitoring the required documents for completion according to community policy on 1/11/2016.

Ongoing – The Health and Wellness Director/ Health and Wellness Coordinator will update support plans as needed. Both will audit the Resident assessments and support plans randomly each month to ensure that the content accurate reflects services received.

Sid Denny Granahan, Executive Director [Signature] 3/17/2016

~~[Signature]~~ BKH 3/21/16