



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: lennie.boop@brookdale.com
MAILING DATE: August 21, 2019

Ms. Stacey Meyer
Assistant Secretary
Emeritus Corporation
6737 West Washington Street, Suite 2300
Milwaukee, Wisconsin 53214

RE: Brookdale Grayson View
29 Grayson View Court
Selinsgrove, Pennsylvania 17870
License #: 227930

Dear Ms. Meyer:

As a result of the Department's Bureau of Human Services Licensing inspection on June 17, 2019 of the above facility, the citations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Anne Graziano".

Anne Graziano
Human Services Licensing Supervisor

Enclosure
Violation Report

Violation Report

Facility Information

Name: *BROOKDALE GRAYSON VIEW*

License Number: 227930

Address: *29 GRAYSON VIEW COURT, SELINGSGROVE, PA 17870*

County: *SNYDER*

Region: *NORTHEAST*

Administrator

Name: *Lennie Boop*

Phone: *5703742923*

Email: *lennie.boop@BROOKDALE COM*

Legal Entity

Name: *EMERITUS CORPORATION*

Address: *6737 W WASHINGTON STREET, SUITE 2300, MILWAUKEE, WI, 53214*

Certificate(s) of Occupancy

Type: *C-2 LP*

Date:

Issued By:

Staffing Hours

Resident Support Staff: *67*

Total Daily Staff: *148*

Waking Staff: *111*

Inspection

Type: *Partial*

BHA Docket #:

Notice: *Unannounced*

Reason: *Complaint*

Inspection Dates and Department Representative

06/17/2019 - Off-Site: Duane Valence

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *95*

Residents Served: *67*

Secured Dementia Care Unit

In Home: *Yes*

Area: *Clarebridge Hall*

Capacity: *16*

Residents Served: *11*

Hospice

Current Residents: *2*

Number of Residents Who:

Receive Supplemental Security Income: *0*

Are 60 Years of Age or Older: *67*

Diagnosed with Mental Illness: *1*

Diagnosed with Intellectual Disability: *0*

Have Mobility Need: *14*

Have Physical Disability: *0*

Brookdale Grayson View

Plan of Correction

The following is the Plan of Correction for Brookdale Grayson View in regard to the Statement of Deficiency dated August 5, 2019 for incident follow-up off-site inspection on June 17, 2019. The Plan of Correction report 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 improvements to satisfy that objective.

132h - Designated Meeting Place

Regulations

2600.

132.h. Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

Description of Violation

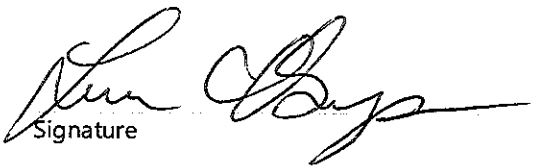
- Interviews with staff person "A" the Administrator and Assistant staff person "B" to the Administrator were conducted on 6/17/19. The administrator acknowledged the home's fire alarm system was activated back in January or February 2019 in resident #1 bedroom. The date of the fire alarm activation was not recorded by the administrator. Residents in the facility initiate a fire evacuation upon hearing the fire alarm. The administrator instructed his/her assistant to silence the alarm and stop the evacuation while residents of the home where in the process of evacuating to fire safe areas. Staff Person "B" then contacted the local fire department to stop their response. Staff person "B" afterward contacted Simplex Grinnell, the home's fire monitoring company to advise them of a false alarm.

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.)

Please See Attached

Legal Entity Representative


Signature

Hennie C. Boop, Executive Director 8/17/19
Printed Name and Title Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 8-13-19
(Date)

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

Plan of correction implementation status as of 8-13-19
(Date)

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

Regulation 2600.132(h)

January/February – Administrator responded to resident bedroom #1 in less than 10 seconds after alarm sounded to find that a brownie had been overcooked in the microwave by Resident #1. Administrator/Executive Director has been trained by the Pennsylvania State Fire Academy.

8/6/2019 – The Administrator spoke with DHS Regional Licensing Director for clarification and follow-up on this incident. The Administrator re-trained all management staff on the community policy regarding the need to have the local fire department responds to every incident in which the alarms are activated. The fire department will be the only authorized authority to silence/reset the alarm system.

8/6/2019 and ongoing - The Administrator or designee will track all incidents in which the alarm system is activated to verify all appropriate residents are evacuated to a fire safe area or a designated meeting place away from the building. The Administrator will review any incidents where the fire alarms are activated for 6 months at the quality assurance meetings to verify if any further action is warranted.

Evidence: Staff Training Log

Completion Date: 8/6/2019

8-13-19

AG