



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Mailing Date: November 5, 2019

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

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

Dear Ms. Meyer:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Office of Long-term Living) review on October 30, 2019 and October 31, 2019 of the above facility, we have determined that your submitted plan of correction is:

Accepted, fully implemented and in compliance. Continued compliance must be maintained.

If you need assistance, please contact me at 717-418-9656 or email: bswanger@pa.gov.

Sincerely,

A handwritten signature in black ink that reads "Brett Swanger".

Brett Swanger
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: *BROOKDALE GRANDON FARMS* License Number: *31612*
Address: *1100 GRANDON WAY, MECHANICSBURG, PA 17055*
County: *CUMBERLAND* Region: *CENTRAL*

Administrator

Name: *Jesse Weidman* Phone: *7177304033* Email:

Legal Entity

Name: *EMERITUS CORPORATION*
Address: *6737 W. WASHINGTON ST, STE 2300, MILWAUKEE, WI, 53214*

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *03/16/2006* Issued By: *L & I*

Staffing Hours

Resident Support Staff: *71* Total Daily Staff: *173* Waking Staff: *130*

Inspection

Type: *Full* BHA Docket #: Notice: *Unannounced*
Reason: *Renewal, Settlement*

Inspection Dates and Department Representative

10/30/2019 - On-Site: Michael Showers, Michael Palermo

10/31/2019 - On-Site: Michael Showers, Michael Palermo

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *120* Residents Served: *71*

Secured Dementia Care Unit

In Home: *Yes* Area: *Memory Care* Capacity: *30* Residents Served: *17*

Hospice

Current Residents: *9*

Number of Residents Who:

Receive Supplemental Security Income: *1* Are 60 Years of Age or Older: *71*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *37* Have Physical Disability: *0*

JDW 11/4/19

233c - Key-Locking Devices

Regulations

2600.

233.c. If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

Description of Violation

There was no code for the operation of the door's locking system posted at the exit leading to the enclosed courtyard in the secured dementia care unit.

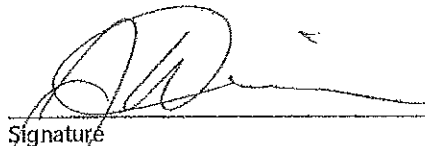
Plan of Correction (POC)

(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.)

X Please see attached

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Legal Entity Representative



Signature

Jesse Waldman ED

Printed Name and Title

11/14/19

Date

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The above plan of correction is approved as of 11/5/2019 (Date) Plan of correction implementation status as of 11/5/2019 (Date)

Fully Implemented

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

Not Implemented



Brookdale at Grandon Farms

Plan of Correction

The following is the Plan of Correction for Brookdale at Grandon Farms in regard to the Statement of Deficiency dated November 4, 2019 for full renewal/settlement inspection on October 30, 2019 and October 31, 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.

Regulation 2600.233 (c)

Immediately, the operation code for the door to the courtyard in the secure dementia was reposted.

The Executive Director retrained the appropriate staff as to the community policy on posting of exit codes in the secure dementia unit on November 4, 2019.

The Manager of the Memory Care Unit or designee will audit the signage at the exit doors monthly for 6 months and then quarterly for 6 months to verify the signage is present. This will be documented on the attached checklist.

The Executive Director will review the results of the audit to verify if any further action is warranted.

Evidence: Training attendance sheet, audit tool, picture of the posted door code

Completion Date- November 4, 2019

[Handwritten Signature] 11/4/19