

Department of Human Services
Bureau of Human Service Licensing

December 4, 2020

LENNIE BOOP, ADMINISTRATOR
EMERITUS CORPORATION
6737 W. WASHINGTON STREET
SUITE 2300
MILWAUKEE, WI 53214

RE: BROOKDALE GRAYSON VIEW
29 GRAYSON VIEW COURT
SELINGSGROVE, PA, 17870
LICENSE/COC#: 22793

Dear Mr. Boop,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/21/2020, 10/23/2020, 10/29/2020, 11/02/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Michele Moskalczyk
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *BROOKDALE GRAYSON VIEW* License #: *22793* License Expiration Date: *07/02/2021*
Address: *29 GRAYSON VIEW COURT, SELINGROVE, PA 17870*
County: *SNYDER* Region: *NORTHEAST*

Administrator

Name: *Lennie Boop* Phone: *5703742923* Email:
lennie.boop@BROOKDALE.com, lindscott@pa.gov,
mmoskalczy@pa.gov

Legal Entity

Name: *EMERITUS CORPORATION*
Address: *6737 W. WASHINGTON STREET, SUITE 2300, MILWAUKEE, WI, 53214*
Phone: *5703742923* Email: *CSTRASBURG@BROOKDALE.COM*

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *01/19/2000* Issued By: *PAL*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *64* Waking Staff: *48*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Incident* Exit Conference Date: *11/02/2020*

Inspection Dates and Department Representative

10/21/2020 - Off-Site: Corey Pica
10/23/2020 - Off-Site: Corey Pica
10/29/2020 - Off-Site: Corey Pica
11/02/2020 - Off-Site: Corey Pica

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *95* Residents Served: *51*

Secured Dementia Care Unit

In Home: *Yes* Area: *Secured Unit* Capacity: *16* Residents Served: *12*

Hospice

Current Residents: *1*

Resident Demographic Data as of Inspection Dates (*continued*)

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 51

Diagnosed with Mental Illness: 1

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 13

Have Physical Disability: 0

Inspections / Reviews

10/21/2020 - Partial

Lead Inspector: *Corey Pica*Follow-Up Type: *POC Submission*Follow-Up Date: *12/03/2020*

12/1/2020 - POC Submission

Lead Reviewer: *Michele Moskalczyk*Follow-Up Type: *Document Submission*Follow-Up Date: *12/08/2020*

12/4/2020 - Document Submission

Lead Reviewer: *Michele Moskalczyk*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 Repeat Violation

Resident 1 yelled at and pushed resident 2 to the ground for entering her room. Resident 2 was allowed in the room as she was invited into the room by the roommate of Resident 1. A 2nd incident occurred when Resident 1, yelled at Resident 2 to get out of a chair in a common area because she wanted it. Resident 2 stood to give up the chair and was pushed back into the chair and called useless by Resident 1.

Plan of Correction

Accept

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 November 22, 2020 for incident follow-up off-site inspection on 10/21/2020, 10/23/2020, 10/29/2020 and 11/02/2020. 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 2600.42(c) -

- Immediately – Both Secured Dementia Care Unit residents were redirected, behavior plans updated and placed on 15 minute checks initially then checks hourly thereafter. Every effort is being made to avoid close contact between these residents. Resident # 2 is scheduled to be transferred to a Skilled Nursing Care Facility as soon as COVID protocols are managed within that skilled facility.*
- November 2020 – All associates were re-trained on the community policy regarding dignity and respect of the residents by the Executive Director and Health and Wellness Director.*
- 11/30/2020 and ongoing - The Administrator, management team and staff will continue to promote resident dignity at orientation, dementia training, annual trainings, during staff meetings and whenever indicated. The Administrator and management team will review any incidents at the quality assurance meetings to verify if any further action is warranted.*

Evidence: Staff Training Attendance

Completion Date: 11/30/2020

Completion Date: 11/30/2020

Update - 12/01/2020

Please send/attach training documentation.

42c - Treatment of Residents *(continued)*

Document Submission

Implemented

Training Sheets attached.