

Department of Human Services  
Bureau of Human Service Licensing

June 16, 2022

[REDACTED]  
THE GREENBRIAR INDEPENDENT AND ASSTD LIVING COMMUNITY, INC  
4244 MEMORIAL HIGHWAY  
DALLAS, PA, 18612

RE: THE VILLAGE AT GREENBRIAR  
4244 MEMORIAL HIGHWAY  
DALLAS, PA, 18612  
LICENSE/COC#: 21332

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/25/2021, 10/29/2021, 11/08/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Anne Graziano

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: *THE VILLAGE AT GREENBRIAR* License #: *21332* License Expiration: *07/30/2022*  
Address: *4244 MEMORIAL HIGHWAY, DALLAS, PA 18612*  
County: *LUZERNE* Region: *NORTHEAST*

**Administrator**

Name: [REDACTED] Phone: *5706751300* Email: [REDACTED]

**Legal Entity**

Name: *THE GREENBRIAR INDEPENDENT AND ASSTD LIVING COMMUNITY, INC*  
Address: *4244 MEMORIAL HIGHWAY, DALLAS, PA, 18612*  
Phone: *5706751300* Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *06/23/2004* Issued By: *Pa. L & I*

**Staffing Hours**

Resident Support Staff: *66* Total Daily Staff: *136* Waking Staff: *102*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Incident* Exit Conference Date: *11/08/2021*

**Inspection Dates and Department Representative**

10/25/2021 - Off-Site: [REDACTED]  
10/29/2021 - Off-Site: [REDACTED]  
11/08/2021 - Off-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *78* Residents Served: *66*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *0*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *66*  
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *4* Have Physical Disability: *2*

## Inspections / Reviews

10/25/2021 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *01/28/2022*

02/08/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *02/15/2022*

02/24/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *03/07/2022*

06/16/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 227c - Support Plan Revision

**1. Requirements**

2600.

227.c. The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment.

**Description of Violation**

Resident #1 was admitted to the home on [REDACTED]. Resident #1's initial assessment and support plan (RASP) was completed and signed on [REDACTED]. Resident #1 had 13 falls documented in the resident's notes since the date of admission. Resident had falls on 5/29/21, 7/11/21, 8/2/21, 8/19/21, 9/1/21, 9/2/21, 9/4/21 twice, 9/23/21, 9/24/21, 9/25/21, 9/26/21, and 10/16/21. Two of the falls required resident #1 being seen in a hospital Emergency Room ; one fall was dated [REDACTED] 1 and the other was one of two falls on [REDACTED]. Incident reports were submitted to BHSL for the falls on [REDACTED] 1 and [REDACTED]. No documentation was provided by either the Administrator or Director of Wellness to indicate resident #1's support plan (RASP) was ever updated to provide for the necessary care or support or interventions necessary for staff to address resident # 1's need for fall prevention.

**Plan of Correction****Do Not Accept**

Items noted on the attached updated RASP were implemented after initial fall and subsequent falls. Resident alert and oriented and at times is non compliant with instruction and education.

PCAs were notified via memos and notes placed in Resident room by Administrator/Nurse/Family on several occasions near Residents wall by chair and in bathroom. Family also actively involved in reminders and encouragement to Resident on each visit and phone calls daily.

RASP was just not updated.

RASP was updated on 11/9/2021

Going forward Administrator and/or Director of Wellness will monitor RASP updates for a Resident when care needs change.

**Completion Date:** 01/26/2022

**Update:** 02/08/2022

Is there a systemic method of communication between direct care staff and director of wellness to communicate concerns/problems? What will be the systemic method of review/updating to Resident RASPs for updates or changes when needed? Are there regular meetings or events where communication is exchanged?

AG, 2-8-22

**Plan of Correction****Accept**

The Village at Greenbriar has a method of communication between Direct Care Staff/Director of Wellness/ Nurse /Administrator to address and/or notify of any Resident issues and/or concerns or changes in status.

This is reason being a fall (s) by this Resident was addressed and the communication process and plan was continuously changing and addressed with Resident/Family and all involved staff.

A communication book is utilized for shift to shift communication as well as any issue with a Resident such as a fall/ER transport., etc. Administrator is notified of any falls, etc via text or phone call at time of occurrence.

Verbal shift report is given to on coming shift from exiting shift.

Administrator is also aware of any concerns --daily --by verbal and/or written communication with staff on each shift. Any concerns are addressed through a staff meeting with each shift or conference call with staff.

RASPs are updated as needed. As previously addressed – all interventions for this Resident were in use and staff aware by means described. RASP was just not updated, but other means of communication by and /to staff and

227c - Support Plan Revision (continued)

interventions were in place.

The Village at Greenbriar will continue to communicate as described.

Director of Wellness will monitor and address RASP updates as a Resident care/status changes.

Administrator will continue to monitor Rasp updates by/with Director of Wellness .

Completion Date: 02/09/2022

Document Submission

Implemented

The Village at Greenbriar has Daily Morning Meetings between Administrator or Director of Wellness Nurse (s) and Lead Med tech/Shift supervisor to discuss any Resident changes or concerns. Meetings approximately 15minutes. Morning information is then communicated via verbal or written shift reports. Director of Wellness updates Rasps as needed. When Administrator is off or not in facility, communication to same is provided via text messages or phone call depending on issue/concern.

Staff participating in daily meetings on any given day:

-  /Adminstrator
-  , LPN/Director of Wellness
-  LPN
-  /PCA Supervisor
- Daily Lead Med Tech

Department of Human Services  
Bureau of Human Service Licensing  
PRIVACY CODING

Facility Information

Name: *THE VILLAGE AT GREENBRIAR*

License #: 21332

License Expiration: 07/30/2022

Address: 4244 MEMORIAL HIGHWAY, DALLAS, PA 18612

Inspection Information

Start Date: 10/25/2021

Type: *Partial*

Staff Privacy Coding

Designation

Staff Members Name

Job Title

Date Hired

Resident Privacy Coding

Designation

Resident's Name