

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

December 27, 2023

[REDACTED],  
GAHC3 YORK PA ALF TRS SUB LLC  
[REDACTED]

RE: SENIOR COMMONS AT POWDER  
MILL  
1775 POWDER MILL ROAD  
YORK, PA, 17403  
LICENSE/COC#: 33210

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/14/2023, 12/15/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,  
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

**Name:** SENIOR COMMONS AT POWDER MILL      **License #:** 33210      **License Expiration:** 01/18/2024

**Address:** 1775 POWDER MILL ROAD, YORK, PA 17403

**County:** YORK      **Region:** CENTRAL

**Administrator**

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

**Legal Entity**

**Name:** GAHC3 YORK PA ALF TRS SUB LLC

**Address:** [REDACTED]

**Certificate(s) of Occupancy**

**Type:** C 2 LP      **Date:** 07/23/2001      **Issued By:** Labor and Industry

**Staffing Hours**

**Resident Support Staff:** 0      **Total Daily Staff:** 142      **Waking Staff:** 107

**Inspection Information**

**Type:** Partial      **Notice:** Unannounced      **BHA Docket #:**

**Reason:** Incident      **Exit Conference Date:** 12/14/2023

**Inspection Dates and Department Representative**

12/14/2023 On Site: [REDACTED]

12/15/2023 Off Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 166      **Residents Served:** 107

**Secured Dementia Care Unit**

**In Home:** Yes      **Area:** Arlington and Rosewood Courts      **Capacity:** 28      **Residents Served:** 25

**Hospice**

**Current Residents:** 4

**Number of Residents Who:**

**Receive Supplemental Security Income:** 0      **Are 60 Years of Age or Older:** 107

**Diagnosed with Mental Illness:** 0      **Diagnosed with Intellectual Disability:** 0

**Have Mobility Need:** 35      **Have Physical Disability:** 1

**Inspections / Reviews**

12/14/2023 Partial

**Lead Inspector:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 01/02/2024

**12/22/2023 POC Submission**

Submitted By: [REDACTED]

Date Submitted: 12/27/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 01/19/2024

**12/27/2023 Document Submission**

Submitted By: [REDACTED]

Date Submitted: 12/27/2023

Reviewer: [REDACTED]

Follow Up Type: Not Required

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [REDACTED] at [REDACTED], staff person A said to Resident 1, "Where do you think you're going? You're not allowed to be in here. Get the fuck out of here." Witnesses to the incident described the resident as sobbing and emotional afterward.

Plan of Correction

Accept [REDACTED] - 12/22/2023)

Immediate Correction Actions: Staff member suspended by memory care director on 11/28/23. Resident was assessed and no concerns noted by memory care director.

Additional Corrective Actions: Memory Care Director (was in the community) and contacted by witnesses who overheard comment made. Memory Care Director gathered witness statements. Memory Care Director reached out to staff member alleged to make comment. Memory Care Director suspended staff member alleged to make comment immediately. All actions completed on 11/28/23. Investigation completed and resulted in inappropriate comment being substantiated. Community separated employment with staff member on 12/4/23.

Ongoing Quality Assurance Actions: All staff will continue to do annual trainings on resident rights and abuse reporting. Any concerns raised by residents, staff or families will be reviewed at quarterly QA meetings. Next review scheduled for January 16th 2024. Executive Director will provide oversight for entire plan of correction.

Licensee's Proposed Overall Completion Date: 12/21/2023

Implemented ([REDACTED] - 12/27/2023)