

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

April 1, 2024

[REDACTED]
EMERITUS CORPORATION
[REDACTED]
[REDACTED]

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

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/21/2024 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: *BROOKDALE GRAYSON VIEW* License #: *22793* License Expiration: *07/02/2024*
 Address: *29 GRAYSON VIEW COURT, SELINSGROVE, PA 17870*
 County: *SNYDER* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *EMERITUS CORPORATION*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *01/19/2000* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *104* Waking Staff: *78*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint* Exit Conference Date: *02/21/2024*

Inspection Dates and Department Representative

02/21/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *95* Residents Served: *78*

Secured Dementia Care Unit
 In Home: *Yes* Area: *NA* Capacity: *24* Residents Served: *15*

Hospice
 Current Residents: *4*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *78*
 Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *1*
 Have Mobility Need: *26* Have Physical Disability: *1*

Inspections / Reviews

02/21/2024 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/15/2024*

03/18/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *03/29/2024*
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *03/21/2024*

Inspections / Reviews *(continued)*

04/01/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/29/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42s - Privacy

1. Requirements

2600.

42.s. A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.

Description of Violation

Upon admission, resident and Resident's POA signed the photograph authorization form stating not authorized for pictures. The form was signed on [REDACTED]. The resident's picture and name were published by the home in their December 2023 monthly newsletter.

Plan of Correction

Accepted [REDACTED] 03/18/2024)

3/01/24-Business Office Manager (BOM) reviewed any current community newsletters and pictures to verify no residents were present in photos that have not given consent. No other pictures were out of compliance. 3/01/2024- Audit completed by the BOM on resident files to verify photo authorizations were present and completed. The list of photo authorization forms was updated and distributed to managers. 3/14/2024 – Appropriate management staff were re-trained by the Executive Director (ED) on the community policy regarding obtaining consent authorizations from residents and families prior to publishing their pictures, Going forward, consent authorization forms will continue to be completed on admission, list of consent status will be updated with each admission or change in status of consent as it occurs by the Business Office Manager.

Licensee's Proposed Overall Completion Date: 03/29/2024

Implemented [REDACTED] - 04/01/2024)

227d - Support Plan Medical/Dental

2. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Upon admission, home was made aware of resident's visual impairment and difficulty with food, it was noted that cut up food is best for resident and no pasta. This is not noted in Residents assessment and support plan, date [REDACTED].

Plan of Correction

Accepted [REDACTED] - 03/18/2024)

2/21/2024-Resident's support plan/RASP was updated by the Health and Wellness Coordinator to document food preferences which included cutting up food due to visual impairments and the addition of no pasta as a preference. Resident has since discharged and is no longer residing in the community as of March 9, 2024. 2/22/24- Health and Wellness Coordinator was re-trained by the District Director of Clinical Services regarding the community policy on documenting resident preferences and additional care needs in the support plan/ RASP. Resident support plan/RASP's will be reviewed for each resident moving in for 1 month starting March 1, 2024 for inclusion of food preferences and additional care needs as documented on the Food Preference List in the move-in packet by the HWC or designee. This audit will continue until March 31, 2024. Ongoing, HWD or designee will complete random audits monthly of four (4) support plans/RASP for one more month. The HWD or designee will review results of audits to determine if any further action is warranted.

227d - Support Plan Medical/Dental (continued)

Licensee's Proposed Overall Completion Date: 03/29/2024

Implemented [REDACTED] - 04/01/2024)