

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

July 8, 2024

[REDACTED]  
EMERITUS CORPORATION  
[REDACTED]

SUITE 2300  
[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 05/22/2024, 06/03/2024 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, SELINGSGROVE, 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**

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *100* Waking Staff: *75*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Complaint, Incident* Exit Conference Date: *06/03/2024*

**Inspection Dates and Department Representative**

05/22/2024 - On-Site: [REDACTED]  
 06/03/2024 - Off-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *95* Residents Served: *77*

**Secured Dementia Care Unit**  
 In Home: *Yes* Area: *Clarebridge* Capacity: *24* Residents Served: *17*

**Hospice**  
 Current Residents: *2*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *77*  
 Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *23* Have Physical Disability: *0*

**Inspections / Reviews**

**05/22/2024 - Partial**

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *07/05/2024*

**07/08/2024 - POC Submission**

Submitted By: [REDACTED] Date Submitted: *07/08/2024*  
 Reviewer: [REDACTED] Follow-Up Type: *Bypass Document Submission*

Inspections / Reviews *(continued)*

07/08/2024 - Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/08/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

20b4 - Use of Funds

1. Requirements

2600.

20.b. If the home provides assistance with financial management or holds resident funds, the following requirements apply:

4. Resident funds and property shall only be used for the resident's benefit.

Description of Violation

On [REDACTED] the facility was informed by the Pennsylvania State Police that Resident [REDACTED] credit card was stolen and fraudulent charges in the amount of approximately [REDACTED] were incurred. The credit card was stolen from the facility.

Plan of Correction

Accept [REDACTED] - 07/08/2024)

The following is the Plan of Correction for Brookdale Grayson View in regard to the Statement of Deficiency dated [REDACTED] for an incident, complaint inspection follow-up on [REDACTED] and on [REDACTED]. 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.

Brookdale Grayson View does not assist with financial management or holding of resident funds.

[REDACTED] - The Executive Director (ED) and Health and Wellness Director (HWD) interviewed other residents regarding missing valuables or money and no other resident was noted to have valuables missing.

[REDACTED] -The staff person under investigation by the state police is no longer an employee of Grayson View.

[REDACTED] - Resident Engagement Coordinator reviewed at resident counsel the community policy on residents locking their rooms and assuring valuables are secured.

Ongoing- BOM or designee will continue to review on move-in, the community policy regarding residents locking their doors when exiting. Safe practices also include not leaving cash, wallets, credit cards, or checkbooks out in visible areas. The community can provide a lock on the nightstand drawer on request.

[REDACTED] - Executive Director will review the community policy regarding securing resident valuables at the monthly staff meeting.

Ongoing- To assist with compliance, the ED, BOM or designee will continue to review on move-in the policy regarding valuables as well as complete the attached acknowledgement consent. Any reported incidents will be investigated as necessary.

ED to verify compliance and determine if any further action is warranted starting [REDACTED].

Licensee's Proposed Overall Completion Date: 07/17/2024

Implemented [REDACTED] 07/08/2024)