

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

April 14, 2025

[REDACTED]  
RAK ASSISTED LIVING, INC  
[REDACTED]

RE: GRACIOUS LIVING ESTATES  
10543 STATE ROUTE 29  
MONTROSE, PA, 18801  
LICENSE/COC#: 23167

[REDACTED],  
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/12/2025 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: GRACIOUS LIVING ESTATES License #: 23167 License Expiration: 07/17/2025  
 Address: 10543 STATE ROUTE 29, MONTROSE, PA 18801  
 County: SUSQUEHANNA Region: NORTHEAST

**Administrator**

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

**Legal Entity**

Name: RAK ASSISTED LIVING, INC  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: C-2 LP Date: 06/08/1998 Issued By: L&I

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 46 Waking Staff: 35

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #:  
 Reason: Complaint Exit Conference Date: 03/12/2025

**Inspection Dates and Department Representative**

03/12/2025 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 65 Residents Served: 39  
 Secured Dementia Care Unit  
 In Home: No Area: Capacity: Residents Served:  
 Hospice  
 Current Residents: 3  
 Number of Residents Who:  
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 39  
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 1  
 Have Mobility Need: 7 Have Physical Disability: 0

**Inspections / Reviews**

03/12/2025 Partial  
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 04/07/2025

04/04/2025 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: 04/10/2025  
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 04/11/2025

Inspections / Reviews *(continued)*

04/14/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/10/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

## 225c Additional Assessment

**1. Requirements**

2600.

225.c. The resident shall have additional assessments as follows:

2. If the condition of the resident significantly changes prior to the annual assessment.

**Description of Violation**

Resident [REDACTED] assessment, dated [REDACTED] does not include updates to indicate that the resident's level of supervision in the home had changed, or that [REDACTED] had an increased behavioral issues.

**Plan of Correction**

Accept ([REDACTED] - 04/04/2025)

Agreed. 04/01/2025. Resident [REDACTED] has had slight mood changes over a period of time. Each time they were corrected by medication changes done by the VA. The incident of 01/16/2025 was extreme and not something GLE staff had previously witnessed. Most certainly, we ([REDACTED] (Director of Health Services), [REDACTED] (PCH Assistant Admin.) and [REDACTED], (PCH Admin.) have discussed this situation and are in agreement that all future instances of increased behavioral issues (agitation)/behavioral changes will be noted in the resident's plan (RASP). [REDACTED], Director of Health Svcs and [REDACTED], Assistant PCH Administrator have reviewed a number of RASP's to insure that they properly reflect the information relative to the mental state of our residents. 04/02/2025, All RASPs are in order. [REDACTED], PCH Administrator is responsible to insure that our resident RASPs reflect the needs of our residents.

Licensee's Proposed Overall Completion Date: 04/02/2025

Implemented ([REDACTED] - 04/14/2025)