

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

August 4, 2025

[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 licensing inspections on 07/24/2025 of the above facility, no regulatory citations have been identified as a result of this inspection.

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

Sincerely,

[REDACTED]

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: *BROOKDALE GRAYSON VIEW* License #: *22793* License Expiration: *06/27/2025*
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

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

Staffing Hours

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

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Interim* Exit Conference Date: *07/24/2025*

Inspection Dates and Department Representative

07/24/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

| | | | |
|--|-------------------|--|-----------------------------|
| General Information | | | |
| License Capacity: <i>95</i> | | Residents Served: <i>77</i> | |
| Secured Dementia Care Unit | | | |
| In Home: <i>Yes</i> | Area: <i>Unit</i> | Capacity: <i>24</i> | Residents Served: <i>15</i> |
| Hospice | | | |
| Current Residents: <i>5</i> | | | |
| Number of Residents Who: | | | |
| Receive Supplemental Security Income: <i>0</i> | | Are 60 Years of Age or Older: <i>77</i> | |
| Diagnosed with Mental Illness: <i>0</i> | | Diagnosed with Intellectual Disability: <i>0</i> | |
| Have Mobility Need: <i>27</i> | | Have Physical Disability: <i>0</i> | |

Inspections / Reviews

07/24/2025 Partial
Lead Inspector: [REDACTED] Follow-Up Type: *Not Required*

NO DEFICIENCIES FOUND