



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE  
100 LACKAWANNA AVENUE  
ROOM 330, SCRANTON STATE OFFICE BUILDING  
SCRANTON, PENNSYLVANIA 18503-1923

ADULT RESIDENTIAL LICENSING

PHONE: (570) 963-3209  
1-800-833-5095  
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**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**MAILING DATE: November 18, 2011**

Ms. Paula Sagan-Hahn, Executive Director  
Lakewood Senior Living-Drums, LLC  
Fritzingertown Senior Living Community  
159 South Old Turnpike Road  
Drums, Pennsylvania 18222

Dear Ms. Sagan-Hahn:

As a result of the Department of Public Welfare's licensing inspection on September 26, 2011 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

Sincerely,

*Anne Graziano*

Regional Licensing Administrator

Enclosure  
Violation Report

VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME FRITZINGERTOWN SENIOR LIVING COMMUNITY, 159 SOUTH OLD TURNPIKE ROAD DRUMS, PA 18222		CURRENT LICENSE NUMBER 201660	
INSPECTION DATES (Include all dates of the inspection) 09/26/2011		REGIONAL REPRESENTATIVE Florence Babiarz	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Paula Sagan-Halaw RW - Executive Director</i>			
SIGNATURE OF LEGAL ENTITY <i>Paula Sagan Halaw</i>	DATE <i>10/24/11</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Diane Drozdzio</i>	DATE <i>11-17-11</i>

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
231c A written cognitive preadmission screening completed in collaboration with a physician or a geriatric assessment team and documented on the Department's preadmission screening form shall be completed for each resident within 72 hours prior to admission to a secured dementia care unit.	Resident #1 Pre-Admission Screening dated 9/23/2011, Part IV: Cognitive Screening was not completed. Resident was admitted to the SDU on 9/23/2011.	09/27/11	Physician forwarded signed pre-admission assessment on 9/27/11.  Administrator will encourage all physicians to promptly complete/return required forms.  Administrator will ensure that all required forms are completed prior to admission to facility.	<i>DG</i> 11-17-11