



Sent via email to: [REDACTED]
MAILING DATE: October 22, 2012

Ms. Sharon Kaiser/CFO
Lehigh Pointe Senior Living TRS, LLC
1920 Main Street, Suite 400
Irvine, California 91614

RE: Woodland Terrace at the Oaks
1263 South Cedar Crest Boulevard
Allentown, Pennsylvania 18103

Dear Ms. Kaiser:

As a result of the Department of Public Welfare's (Department) licensing inspection on September 25, 2012 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 Human Services Licensing so that compliance can be verified.

Sincerely,

A handwritten signature in cursive script that reads "Anne Graziano".

Anne Graziano
Regional Licensing Administrator

Enclosure
Violation Report

Violation Report: 22301 - 09/25/2012 - Hummel, Jesse
 PCH Name: WOODLAND TERRACE AT THE OAKS

1. REGULATION 55 Pa.Code §2600
 2600.101(i) - A resident shall have access to his/her bedroom at all times.

2a. DESCRIPTION OF VIOLATION

On 9/25/12 Department Representatives entered the home's secured dementia unit and observed that all resident doors were locked. It was determined through an interview with Administrator A that the home locks all resident doors to eliminate residents from entering other residents rooms. The home has a contract addendum stating "I acknowledge the fact that in the secured dementia unit the door may be locked to my room. I understand that if I am unable to use my key to open my door, I will ask the staff to help me and they will immediately assist me in opening the door. If my family members/ responsible party are here and need access to my room, they will ask the staff to assist and open the door." The contract addendum for resident #1 is not signed by the resident and or the resident's designated person.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Acknowledgement was signed by resident #1 responsible party on 9/25/2012. (See attached #1) Audit has been completed to ensure there are no other missing acknowledgements. Admission Director will continue to get resident/responsible party signatures on admission.

The Executive Director or designee will audit all new resident files for confirmation of acknowledgement. Executive Director or Designee will monitor for ongoing compliance.

Adm & Staff will continue to insure that all residents of the home have access to their rooms at all times. 10-09-12

Repeat Violation: No	Date(s) of Previous Violation(s):		
----------------------	-----------------------------------	--	--

Signature of Legal Entity Representative (Required on EVERY Page) *Victoria Leitgeb*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Victoria Leitgeb</i>	Date <i>10/8/12</i>
--	---------------------

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>10-09-12</u> (Date) The above plan of correction was approved by <u><i>[Signature]</i></u> (Initials)	Plan of correction implementation status as of <u>10-09-12</u> (Date) <input checked="" type="checkbox"/> Fully implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented
--	---