



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**

**MAILING DATE:** APR 15 2015

Ms. Karen Kehler, Executive Director  
227 Evergreen Road Operations, LLC  
227 Evergreen Road  
Pottstown, Pennsylvania 19464

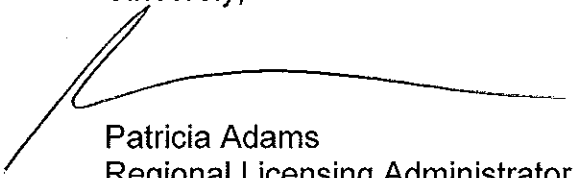
RE: Sanatoga Court  
License #: 136140

Dear Ms. Kehler:

As a result of the Department of Human Services' licensing inspection on November 25, 2014 and November 26 2014 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,



Patricia Adams  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary

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

PCH Name: SANATOGA COURT		License Number: 13614
Address: 227 EVERGREEN ROAD, POTTSTOWN, PA 19464		County: Montgomery
Administrator: Karen Kehler		Region: SOUTHEAST
Legal Entity Name: 227 EVERGREEN ROAD OPERATIONS LLC		
Legal Entity Address: 227 EVERGREEN RODA, POTTSTOWN, PA 19464		
Certificate(s) of Occupancy		
<b>Staffing Hours</b>		
Resident Support: 0	Total Dally Staff: 100	Waking Staff: 75
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 11/25/2014: Keppel, Autumn; McIlvain, Shawn 11/26/2014: Keppel, Autumn; McIlvain, Shawn		
Off-Site Inspection Dates and Inspectors, if Applicable 11/18/2014: Keppel, Autumn		
Other Details		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 85	Number of Residents who:	
Number of Residents Served: 70	Receive Supplemental Security Income: 0	
Secured Dementia Care Unit in Home: Yes	Are 60 Years of Age or Older: 70	
Area: Homestead	Have Mental Illness: 0	
Secured Dementia Unit Capacity, if Applicable: 28	Have an Intellectual Disability: 0	
Number of Residents Served in Secured Dementia Care Unit, if applicable: 26	Have a Mobility Need: 30	
Number of Current Hospice Residents: 1	Have a Physical Disability: 0	
Number of Hospice Residents in past year: 3		

Violation Report: 13614 - 11/18/2014 - Keppel, Aulumn  
 PCH Name: SANATOGA COURT

**1. REGULATION 65 Pa.Code §2600**

2600.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

**2a. DESCRIPTION OF VIOLATION**

On 11/17/14, an allegation of abuse against direct care staff person A was reported to the home. The home did not complete the required Act 13 form and submit it to the local area agency on aging.

**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.*

Please see attached Act 13. At time of incident AAS was notified & facility was told not to do an Act 13, since clarification with DPW Act 13 was sent as follow-up. No allegations were found to be true.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative  
 (Required on EVERY Page) Karen Kehler

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) Karen Kehler Date 3/2/15

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

The above plan of correction is approved as of 3/24/15  
 (Date)

The above plan of correction was approved by [Signature]  
 (Initials)

Plan of correction implementation status as of 3/24/15  
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented