



**Sent via e-mail to: ahasak@pslgroupllc.com**  
**MAILING DATE: April 3, 2020**

Mr. Michael Semian  
Executive Director  
Premier Oakwood Terrace Operating  
LLC 245 Park Avenue, 39<sup>th</sup> Floor  
New York, New York 10167

RE: Oakwood Terrace  
400 Gleason Drive  
Moosic, Pennsylvania 18507  
License #: 226610

Dear Ms. Kurasko-Starinsky:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on February 21, 2020 and February 24, 2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read "M. Moskalczyk".

Michele Moskalczyk  
Human Services Licensing Supervisor

Enclosure  
Licensing Inspection Summary

### Violation Report

#### Facility Information

License Number: 22661

Name: OAKWOOD TERRACE  
Address: 400 GLEASON DRIVE,, MOOSIC, PA 18507  
County: LACKAWANNA Region: NORTHEAST

#### Administrator

Name: Amy Hasak Phone: 5704513171 Email: ahasak@pslgrouppllc.com

#### Legal Entity

Name: PREMIER OAKWOOD TERRACE OPERATING LLC  
Address: 245 PARK AVENUE, 39TH FLOOR, NEW YORK, NY, 10167

#### Certificate(s) of Occupancy

Type: C-2 LP Date: Issued By:

#### Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 43 Waking Staff: 32

#### Inspection

Type: Partial BHA Docket #: Notice: Unannounced  
Reason: Complaint, Incident

#### Inspection Dates and Department Representative

02/21/2020 - On-Site: Amy Deluca  
02/24/2020 - On-Site: Amy Deluca

#### Resident Demographic Data as of Inspection Dates

##### General Information

License Capacity: 58 Residents Served: 33

##### Secured Dementia Care Unit

In Home: Yes Area: The Pines Capacity: 13 Residents Served: 6

##### Hospice

Current Residents: 5

##### Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 0  
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
Have Mobility Need: 10 Have Physical Disability: 0

OAKWOOD TERRACE

56 - Admin 20 Hours/Week

Regulations

2600.

56. Administrator Staffing - The administrator shall be present in the home an average of 20 hours or more per week, in each calendar month.

Description of Violation

The home does not have a qualified personal care home administrator working at least 20 hours per week as of 2/9/2020.

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.)

See ATTACHED.

Legal Entry Representative

*Michael Semian*  
Signature

*Michael Semian Executive Director 3-18-20*  
Printed Name and Title Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 3-19-2020 (Date) Plan of correction implementation status as of 3-19-2020 (Date)

The above plan of correction was approved by MM (Initials)  Implemented doc.  Not Implemented

2600

56.0

A full time Administrator with Pennsylvania credentials and qualifications began the position on Monday March 09,2020.

See attached documents.

3-19-2020--MM

OAKWOOD TERRACE

60a - Staff/Support Plan

Regulations

2600.

60.a Staffing shall be provided to meet the needs of the residents as specified in the resident's assessment and support plan.

Description of Violation

The home has a census of 33 residents with 6 residents residing in the memory care unit known as the Pines. Two of the residents in the Pines require a two person assist in the event of an emergency evacuation. There are 4 residents residing outside of the memory care unit who require a two person assist.

On 2/14/20 there were only 2 staff persons working from 10:30pm to 3:30am.

On 2/16/20 there were only 2 staff persons working from 7pm to 1:00am. At 1:00am there was only 1 staff person working in the home until 6:45am.

Staff interviews indicate that, due to low staffing, resident of the Pines are left unsupervised in the unit while staff help residents outside the Pines unit with getting up and getting dressed in the morning.

The home did not have adequate staff to meet the needs of the residents.

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.)

Legal Entity Representative

*Michael Semian*  
Signature

*Michael Semian EXECUTIVE DIR 3-18-20*  
Printed Name and Title Date

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Implemented  
 Not Implemented

The above plan of correction was approved by MM (Initials)

2600

60.0

A review of staffing schedules was done immediately by the "acting" Wellness Director and adjusted schedules to ensure a minimum of 3 staff were on all shifts.

A new Wellness Director started on 3/09/20, she will review all schedules for dally and by shift to ensure 3 staff members are present on all shifts and make the necessary adjustments when needed.

The use of agency assistance was contracted, and internet job search began 3/10/20 to recruit new staff.

*Michael Semia 3.18.20*

3-19-2020 --MM

OAKWOOD TERRACE

22661

63a - First Aid/CPR Training

Regulations

2600.

63.a. At least one staff person for every 50 residents who is trained in first aid and certified in obstructed airway techniques and CPR shall be present in the home at all times.

Description of Violation

On the following dates and times the home did not have at least one staff person with current certification in first aid and CPR:

2/11, 2/20, and 2/21 during the 3rd shift hours of 10:30pm to 6:45am.

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.)

See Attached

Legal Entity Representative

*Michael Semian*  
Signature

*Michael Semian EXECUTIVE DIR. 3-18-20*  
Printed Name and Title Date

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- Implemented
- Not Implemented

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2600

63a

Since the abbreviated survey, the Wellness Director ensured that the recommended trained staff scheduled have current CPR and First Aid certification on all shifts.

The "acting" Wellness Director identified other staff in need of re certification.

On 3-11-20, 19 staff members were trained in CPR and First Aid. See attached documentation.

The Business office/HR manager will keep track of staff within 90 days of re-certification and arrange training for them. In addition, all new employees after their probationary period will be scheduled by the HR Director to be trained in CPR and First Aid.

A monthly report will be generated detailing the current staff needing re training within 90 day period by the HR manager and given to the Wellness Director and Executive Director to review and follow up as needed.

*Michael Seniar 3/18/20*

3-19-2020--MM