

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

September 14, 2026

[REDACTED]
LAKEWOOD SENIOR LIVING-DRUMS LLC
[REDACTED]
[REDACTED]

RE: FRITZINGERTOWN SENIOR LIVING
COMMUNITY
159 SOUTH OLD TURNPIKE ROAD
DRUMS, PA, 18222
LICENSE/COC#: 20166

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/30/2026 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

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

Sincerely,

[REDACTED]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: FRITZINGERTOWN SENIOR LIVING COMMUNITY **License #:** 20166 **License Expiration:** 12/18/2026
Address: 159 SOUTH OLD TURNPIKE ROAD, DRUMS, PA 18222
County: LUZERNE **Region:** NORTHEAST

Administrator

Name: [REDACTED] **Phone:** [REDACTED] **Email:** [REDACTED]

Legal Entity

Name: LAKEWOOD SENIOR LIVING-DRUMS LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 05/22/2006 **Issued By:** L&I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 116 **Waking Staff:** 87

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 07/30/2026

Inspection Dates and Department Representative

07/30/2026 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 164 **Residents Served:** 87

Secured Dementia Care Unit

In Home: Yes **Area:** Evergreen **Capacity:** 60 **Residents Served:** 21

Hospice

Current Residents: 11

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 87
Diagnosed with Mental Illness: 3 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 29 **Have Physical Disability:** 0

Inspections / Reviews

07/30/2026 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 08/21/2026

08/26/2026 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 09/04/2026
Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 08/31/2026

Inspections / Reviews (*continued*)

08/31/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/04/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 09/05/2026

09/14/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/04/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

85d - Trash Receptacles

1. Requirements

2600.

85.d. Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

Description of Violation

On [REDACTED] at 10:00 a.m. there was a full, uncovered, unattended trash can in the secure dementia unit's kitchen area.

Plan of Correction

Accept [REDACTED] - 08/31/2026)

Description of Violation

On 7/30/26 at approximately 10:00 a.m., a full, uncovered, unattended trash can was observed in the secured dementia care unit's kitchen area.

Plan of Correction

- The uncovered trash can in the secured dementia care unit kitchen was covered immediately. Completed 7/30/2026
- The Administrator/designee will check a sample of kitchen and bathroom trash receptacles throughout the home to confirm each is covered, correcting any found uncovered. Completion date 9/18/2026
- Dietary and direct-care staff will be educated by the Administrator/designee on Regulation 2600.85(d). Completion date 9/18/2026
- The Administrator/designee will periodically check a sample of trash receptacles to verify continued compliance. Completion date 9/18/2026

Completion Date: 09/18/2026

Evidence of completion (photos/updated records and the training sign-in) will be submitted through the SansWrite Portal after the Plan of Correction is approved. Ongoing monitoring records will be maintained on site and available for review.

Licensee's Proposed Overall Completion Date: 09/18/2026

Implemented [REDACTED] 09/11/2026)

103g - Storing Food

2. Requirements

2600.

103.g. Food shall be stored in closed or sealed containers.

Description of Violation

At 9:57 a.m. a box of frozen glazed donuts and a bag of frozen burger patties were opened and unsealed in the kitchen freezer.

Plan of Correction

Accept [REDACTED] - 08/31/2026)

Plan of Correction

- The identified items were sealed or discarded as appropriate, and open food items in the kitchen freezer and

103g - Storing Food (continued)

storage areas were placed in closed or sealed containers. Completed 7/30/2026

- The Administrator/designee will check a sample of food-storage areas (freezer, refrigerator, and dry storage) to confirm food is stored in closed or sealed containers, correcting any items found open. Completion date 9/18/2026
- Dietary staff will be educated by the Administrator/designee on Regulation 2600.103(g). Completion date 9/18/2026

- The Administrator/designee will periodically check a sample of food-storage areas to verify continued compliance. Completion date 9/18/2026

Completion Date: 09/18/2026

Evidence of completion (photos/updated records and the training sign-in) will be submitted through the SansWrite Portal after the Plan of Correction is approved. Ongoing monitoring records will be maintained on site and available for review.

Licensee's Proposed Overall Completion Date: 09/18/2026

Implemented [REDACTED] - 09/11/2026)

190a - Completion Medication Course**3. Requirements**

2600.

- 190.a. A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

Description of Violation

On [REDACTED] staff person A changed the catheter for resident [REDACTED]. Staff person A is a medication technician but the home did not have documentation that staff person A is qualified to provide catheter changes.

Plan of Correction

Accept [REDACTED] - 08/26/2026)

Description of Violation

On 7/4/26, Staff Person A, a medication technician, changed the catheter for Resident [REDACTED]. The home did not have documentation that Staff Person A is qualified to provide catheter changes.

Plan of Correction

- Only licensed nurse or other appropriately qualified, authorized staff meeting the requirements of 55 Pa. Code § 2600.190(a) will perform catheter changes. Catheter changes for Resident [REDACTED] and all residents are performed by a licensed nurse or other appropriately qualified, and authorized staff meeting the requirements of 55 Pa. Code § 2600.190(a). Completed July 30, 2026
- The Director of Nursing or designee have reviewed the training documentation for each medication technician to ensure each such staff is trained and qualified per the requirements of 55 Pa. Code § 2600.190(a) to perform their medication technician assigned duties. Completed 8/21/2026
- Medication technicians and nursing staff have been re-educated by the Administrator/Director of Nursing on scope of 55 Pa. Code § 2600.190(a). Completed on or before 8/21/2026.
- The Director of Nursing or designee will periodically audit a sample of treatment records and staff assignments to verify that care tasks performed by medication technician staff is within their approved qualifications under the requirements of 55 Pa. Code § 2600.190(a) .

190a Completion Medication Course (continued)

Completion Date: 09/18/2026

Licensee's Proposed Overall Completion Date: 09/18/2026

Implemented ([REDACTED] 09/11/2026)