



February 6, 2026

Sherry Kemp-Woodyard
sherrykemp4@gmail.com
1345 East Gates Street
Columbus, OH 43206

Re: Complaint Control Number: 2702415

Dear Sherry Kemp-Woodyard:

This is in response to your complaint concerning the care provided by the ARBORS AT DELAWARE in DELAWARE, Ohio. Based upon your specific allegations, an onsite investigation was conducted on February 2, 2026, which included observations, record reviews, and interviews. The investigation was limited to determining whether the provider meets the Federal and/or State requirements for participation as a NH in the program.

Your complaint was completed in conjunction with additional surveys. Our investigation revealed ARBORS AT DELAWARE does not meet the requirements of the program and was cited for violations of Federal and/or State regulations where appropriate.

To view and print the Statement of Deficiencies online, please use the following link and filter based on the provider type and location: https://publicapps.odh.ohio.gov/eid/Provider_Search.aspx

To request a copy of the Statement of Deficiencies (public record of the investigation issued to the facility) be sent to you by mail please send a written request, including a self-addressed stamped envelope to the address below. If you prefer a copy sent by email, send a written request to PRI@odh.ohio.gov. Please be sure to include the facility name and Complaint Control Number listed above. If you request a copy by mail, please note there is no duplication charge for the first 40 pages, but you will receive a bill at 5 cents per page thereafter. We strive to process requests within 4 to 6 weeks, but the actual time may vary.

Ohio Department of Health
Bureau of Regulatory Operations
Public Information
246 North High Street, 2nd Floor
Columbus, OH 43215-2412

The mission of the Ohio Department of Health is to protect and improve the health of all Ohioans, and we are deeply committed to this work. (For NON-LTC Providers, delete the Ombudsman info) In addition, the Long-Term Care Ombudsman may be able to work with you to help address concerns with the provider. Your local Long-Term Care Ombudsman may be reached at 1-866-243-5678.

We thank you for bringing your concerns to our attention.

Sincerely,

A handwritten signature in black ink, appearing to read "Angela Fox". The signature is written in a cursive, flowing style with a large initial 'A' and a distinct 'F'.

Angela Fox, BSN, RN, Survey Administrator
Bureau of Survey and Certification
Western Region
614-752-9524

AF/sw