

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to ARDEN COURTS OF KING OF PRUSSIA PA, LLC

LEGAL ENTITY

To operate ARDEN COURTS OF KING OF PRUSSIA

NAME OF FACILITY OR AGENCY

Located at 620 WEST VALLEY FORGE ROAD, KING OF PRUSSIA, PA 19406

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

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To provide Personal Care Homes

TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 56
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 56

This certificate is granted in accordance with the Public Welfare Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes

(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from April 6, 2010 until April 6, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 129950

Robert E. Robinson

ISSUING OFFICER

Kevin T. Casey

DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable
and should be posted in a conspicuous place in the facility.

PW 628 - 4/02



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

APR 05 2010

PHONE: (717) 783-3670
FAX: (717) 783-5662

Mr. Barry A. Lazarus, Vice President
Arden Courts of King of Prussia, LLC
333 North Summit Street
Toledo, Ohio 43604

RE: Arden Courts of King of Prussia
620 West Valley Forge Road
King of Prussia, Pennsylvania 19406

Dear Mr. Lazarus:

As a result of the Department of Public Welfare's licensing inspection on December 29, 2009 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 Adult Residential Licensing so that compliance can be verified.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.


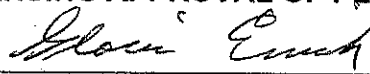
Sincerely,

A handwritten signature in cursive script that reads "Kevin T. Casey".

Kevin T. Casey
Deputy Secretary

Enclosures
License
Violation Report

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME Arden Courts Of King Of Prussia, 620 West Valley Forge Road, King of Prussia, Pennsylvania 19406		CURRENT LICENSE NUMBER 129950	
INSPECTION DATE(S) (Include all dates of the inspection) December 29, 2009		REGIONAL REPRESENTATIVE Ann O'Haire & Gerald Dumas	
SIGNATURE OF LEGAL ENTITY 	DATE 2/3/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 3/31/10


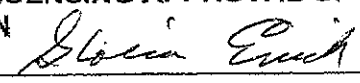
1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
22a1 The following admission document shall be completed for each resident - Preadmission screening completed prior to admission on a form specified by the Department. 224a A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.	Resident #1 (DOA 2/25/09) Preadmission Screening form was not checked where it states if the home is capable of meeting this resident's needs.	2-3-10	A preadmission screening in-service will be held by the executive director on 2-3-10 for the marketing director, resident services coordinator and the administrative services coordinator. The audit tool (attached) will be utilized for the resident files and will be ongoing.	Steps have been taken to correct violation; full compliance is not verifiable <u>3/31/10</u> <u>SE</u> Date Initials (DPW)

RECEIVED

FEB - 8 2010

PCH Division
 Central Region Field Office


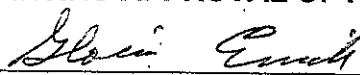
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82c Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.	Resident #2 in room #34 was found to have a container of CVS brand of petroleum jelly marked "obtain medical attention or contact poison control if swallowed."	2-4-10	All containers were removed from resident room #2. The in-service will be held by the ED fallall staff on 2-4-10 regarding reg. 82c. Staff will complete rounds daily beginning 2-4-10 to assure compliance and dispose of any poisonous items. A letter will be sent to all families on 2-1-10 by the ED reminding them to stop bringing in any outside medicines of any kind. Especially if the medicine states to contact poison control or obtain medical attention if swallowed. This practice will be ongoing.	3/31/10 SE
88a Floors, walls, ceilings, windows, doors and other surfaces shall be clean, in good repair and free of hazards.	-The restroom located across from the Community Room on the south side of building had rust discoloration along the bottom surface of the toilet along the floor. - The wall paper under the sink in this rest room was torn.	1-29-09	A corporate 901 request was submitted for approval on 1-29-09. For the complete renovation of the rest room across community center. The renovation will include new wallpaper, flooring and paint throughout.	3/31/10 SE
183b Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is	Resident #2, in room #34, the resident was found to have the following OTC medications located in their bathroom vanity: -Polysporin, bactriam zinc Polymer	2-4-10	All OTC medications were removed from resident room #2. An in-service will be held by the ED on 2-4-10 regarding reg. 183b. Staff will complete rounds daily beginning 2-4-10 to assure compliance and dispose of any OTC meds. found. A letter will be sent out by the ED on 2-1-10 to families reminding them to not bring in any type of OTC medication. This practice will be ongoing.	3/31/10 SE

Steps have been taken to correct violation; full compliance is not verifiable
 Date 3/31/10
 Initials (DPW) SE

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locked. This includes medications and syringes kept in the resident's room.	B Sulfate ointment. -Masbisyl Cream, arthritis pain reliever. -Bengay Pain relief ointment. -Hylard Arthritis Pain Pills, 100 tablet container.	2-4-10	11	
191 The home shall educate the resident of his/her right to question or refuse a medication if he/she believes there may be a medication error. Documentation of this resident education shall be kept.	Residents #1, #2, #3, #4, #5, #6 and #7 did not have documented in their resident records that they were educated in their right to refuse medications if they believe that the medication may have been given in an error.	2-4-10	Residents one through six will have the addendum signed and placed in their files by the ED by 2-4-10 and will be ongoing. Arden Courts will begin using the addendum from here forward to assure compliance.	3/31/10 