



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17102-1810

ADULT RESIDENTIAL LICENSING
Central Region Field Office
1401 North 7th Street
Harrisburg, Pennsylvania 17102-1810

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CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: July 13, 2011

Mr. Barry A. Lazarus, Vice President
Arden Courts of Susquehanna of Harrisburg PA, LLC
333 North Summit Street
Toledo, Ohio 43604

RE: Arden Courts of Susquehanna
2625 Ailanthus Lane
Harrisburg, Pennsylvania 17110

Dear Mr. Lazarus:

As a result of the Department of Public Welfare's licensing inspection on June 21, 2011 of the above personal care home, a violation with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report was 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.

Sincerely,

A handwritten signature in black ink that reads "Cybil Bomberger".

Cybil Bomberger
Regional Licensing Director

Enclosure
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME ARDEN COURTS OF SUSQUEHANNA, 2625 AILANTHUS LANE HARRISBURG, PA 17110		CURRENT LICENSE NUMBER 324310	
INSPECTION DATES (Include all dates of the inspection) 06/21/2011		REGIONAL REPRESENTATIVE Serena Chou	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Beverly W. Hissner, Executive Director</i>			
SIGNATURE OF LEGAL ENTITY <i>Beverly W. Hissner, Ex Dir</i>	DATE <i>7/6/11</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cy D Bomberg</i>	DATE <i>7/12/11</i>

REGULATION 55 Pa.Code §2600	VIOLATION	DATE BY WHICH CORRECTION WILL BE COMPLETED	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)	DATE COMPLIANCE VERIFIED BY
42b A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.	On 6/18/2011, at 6:20 pm, Resident #1 was "slapped" on the right forearm by staff person A while staff person A was providing assistance with undressing. <p align="center">PCH Division Central Region Field Office</p> <p align="center">JUL 7 2011</p> <p align="center">RECEIVED</p>	<i>6/18/11</i>	<i>Staff person A immediately removed from resident care area, by LPN.</i>	Steps have been taken to correct violation; full compliance is not verifiable <i>7/13/11 CB</i> Date Initials (DPW)
		<i>6/18/11</i>	<i>Staff person A's employment was suspended pending investigation of incident.</i>	
		<i>7/1/11, 7/5/11</i>	<i>Inservice education provided to all caregivers on "Handling Difficult Behaviors." Inservice given by [redacted] RN of Pinnacle Adult Mental Health Services.</i>	
		<i>8/3/11</i>	<i>Inservice for all staff on Abuse prevention and reporting given by [redacted] Dauphin Co. Aging office or her staff.</i>	
		<i>Ongoing</i>	<i>Ex. Dir. to continue training on Abuse during orientation and annual training dates.</i>	
		<i>6/20/11</i>	<i>At minimum, every other month. Staff person A terminated.</i>	