



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE  
Norristown State Hospital  
1001 Sterigere Street  
Bldg 2 Rm. 161  
Norristown, Pennsylvania 19401

ADULT RESIDENTIAL LICENSING

1-866-711-4115  
610-270-1137

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**Mailing Date: April 16, 2012**

Mr. Barry A. Lazarus, Vice President  
Arden Courts Warminster of Hatboro Pa, LLC  
333 North Summit Street  
Toledo, Ohio 43604

RE: Arden courts of Warminster  
779 West County Line Road  
Hatboro, Pennsylvania 19040

Dear Mr. Lazarus:

As a result of the Department of Public Welfare's licensing inspection on March 14, 2012 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.

Sincerely,

A handwritten signature in cursive script that reads "Chevon Miller".

Chevon Miller  
Regional Licensing Administrator

Enclosure(s)  
Violation Report

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

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03/29/2012

NAME AND ADDRESS OF PERSONAL CARE HOME ARDEN COURTS OF WARMINSTER, 779 WEST COUNTY LINE ROAD HATBORO, PA 19040		CURRENT LICENSE NUMBER 129960	
INSPECTION DATES (Include all dates of the inspection) 03/14/2012		REGIONAL REPRESENTATIVE Andrea Kurtz, Amy Scharpf	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <b>SHERI MOFFMAN, EXECUTIVE DIRECTOR</b>			
SIGNATURE OF LEGAL ENTITY <i>[Signature]</i>		DATE 3/28/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>
			DATE 4/13/12

REGULATION 55 Pa. Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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
188b A medication error shall be immediately reported to the resident, the resident's designated person and the prescriber.	From 2-15-12 to 2-19-12, an error in Resident #1's medication administration occurred involving Symbyax 6-25 mg not being administered because it was not available. The error was not reported to the resident's designated person and physician until 2-20-12.	188b 4/13/2012	A Reportable Incident was completed and faxed to the Regional Office on 2/20/12. The psychiatrist and physician were notified on 2/20 and an order to give the medication one time upon receipt was received. Med received and given at 1pm on 2/20/12. All nurses will be inserviced on this regulation and on the procedure for ensuring proper notification to the prescriber and designated person immediately; and on the procedure for contacting the pharmacy, via phone, if the med that has been requested is not received within 2-3 hours of the request for an immediate delivery. Use of a new tool, the Pharmacy Log, is being implemented. All nurses will be inserviced on this form and will be implemented by target date, 4/13/12. (see attached).	Steps have been taken to correct violation; full compliance is not verifiable <i>[Signature]</i> Date Initials (DPW)
187d The home shall follow the directions of the prescriber.	On 2-24-12 Seroquel 50 mg was given to Resident #1 at 4:30 pm for increased anxiety. On 2-25-12 Seroquel 50 mg was given at 8 am for high anxiety. The Physician's order dated 1-4-12 through 1-31-12 states Seroquel 50 mg 1 tab at bedtime as needed for sleep.  Repeated Violations: 04/01/2011	187d 4/13/2012	The nurse who did not follow the directions of The prescriber received a discipline for Administering the medication in error.  All nurses and med techs will be inserviced on The 5 Rights of Medication Administration and giving "as needed" medications appropriately by target date.	Steps have been taken to correct violation; full compliance is not verifiable <i>[Signature]</i> Date Initials (DPW)