

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

ADDRESS OF SATELLITE SITE

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 March 22, 2012 until March 22, 2013,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 129950

Robert E. Robinson

ISSUING OFFICER

[Signature]

DIRECTOR

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 - 01/11



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

ADULT RESIDENTIAL LICENSING

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

APR 20 2012

Mr. Barry A. Lazarus, Vice-President
Arden Courts of King of Prussia PA, 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 March 28, 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.

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


Sincerely,

A handwritten signature in black ink, appearing to read "Ronald Melusky".

Ronald Melusky
Director

Enclosures
License
Violation Report

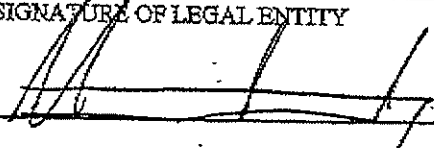
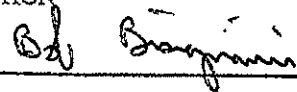
VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa. Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME Arden Courts of King of Prussia, 620 West Valley Forge Road King of Prussia, PA 19406		CURRENT LICENSE NUMBER 129950	
INSPECTION DATES (Include all dates of the inspection) 03/28/2012		REGIONAL REPRESENTATIVE Bob Bisognani, Cybil Bomberger	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Mark D. Dorsey, Executive Director</i>			
SIGNATURE OF LEGAL ENTITY 	DATE 4/2/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Bob Bisognani</i>	DATE 4/9/12

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
16c The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).	The home failed to submit an incident report to the ARL S.E. Regional office regarding an incident that occurred on 3/11/12, when resident #1 became agitated and punched another resident. The name of the other resident was not documented in resident #1's chart. RECEIVED APR 05 2012 SCRANTON FIELD OFFICE Adult Residential Licensing	4-5-12	16c: THE NURSING DEPARTMENT WAS INSERVICED ON REPORTABLES ON 4-3-12 AND WILL BE REVIEWD DAILY IN STAND UP MEETING EVERY MORNING AT 9AM TO ASSURE COMPLIANCE. INSERVICE WAS DONE BY THE EXECUTIVE DIRECTOR. RSS FAILED TO REPORT IT.	4/9/12 BS

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

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NAME AND ADDRESS OF PERSONAL CARE HOME Arden Courts of King of Prussia, 620 West Valley Forge Road King of Prussia, PA 19406		CURRENT LICENSE NUMBER 129950	
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65a Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following: (1) Evacuation procedures. (2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency	Ancillary staff person A, hired on 1/26/12, did not receive an orientation on topic #s 1, 2, 3, 5, 6 and 7 under this regulation prior to or during their first work day. Repeated Violations: 12/08/2010	4.5.12	65A: ANCILLARY STAFF PERSON A RECEIVED THE PROPER ORIENTATION, EVAC. PROCEDURES DUTIES AND RESPONSIBILITIES, DURING FIRE DRILLS, DESIGNATED MEETING PLACE, SMOKING SAFETY, LOCATION OF FIRE EXT. AND TELEPHONE USAGE. ALL INSERVICING DONE BY THE EXECUTIVE DIRECTOR. NEW HIRE CHECK LIST REVIEWED DURING STAND UP MONTHLY AT 9AM. ASC WAS USING THE WRONG FORM THAT DID NOT HAVE THE PROPER ORIENTATION SECTIONS ON IT	Steps have been taken to correct violation; full compliance is not verifiable. 4/9/12 S.S. Date Initials (DPW)

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

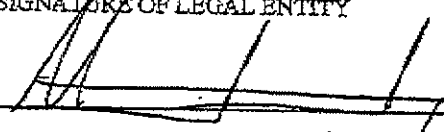
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REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
location if applicable. (3) The designated meeting place outside the building or within the fire-safe area in the event of an actual fire. (4) Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable. (5) The location and use of fire extinguishers. (6) Smoke detectors and fire alarms. (7) Telephone use and notification of emergency services.		4.5.12	see previous page	see previous page

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

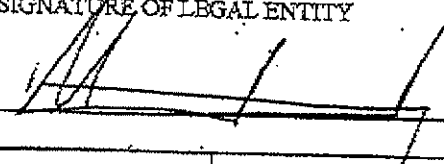
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65b Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following: (1) Resident rights. (2) Emergency medical plan. (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P. S. §§ 10225.101—10226.6102). (4) Reporting of reportable incidents	Ancillary staff person A, hired on 1/28/12, did not receive an orientation on topic #s 2,3 and 4 under this regulation within their first 40 scheduled working hours. Repeated Violations: 12/08/2010	4.5.12	65b: ANCILLARY STAFF PERSON A WAS INSERVICED ON RESIDENTS RIGHTS, EMERGENCY PLAN, MANDATORY REPORTING, ABUS AND NEGLECT UNDER OLDER ADULT PROTECTIVE SERVICES, REPORTING REPORTABLES, INSERVICE COMPLETED BY EXECUTIVE DIRECTOR, WILL BE MONITORED MONTHLY BY THE EXECUTIVE DIRECTOR. ASC HAD THE INCORRECT ORIENTATION FORM.	Steps have been taken to correct violation; full compliance is not verifiable 4/9/12 S.B. Date Initials (DPW)

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

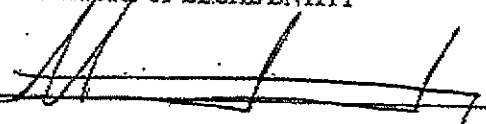
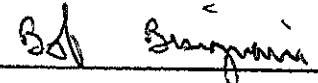
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		4.5.12	see previous page	see previous page

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182b Prescription medication that is not self-administered by a resident shall be administered by one of the following: (1) A physician, licensed dentist, licensed physician's assistant, registered nurse, certified registered nurse practitioner, licensed practical nurse or licensed paramedic. (2) A graduate of an approved nursing program functioning under the direct supervision of a professional nurse who is present in the home.	On 3/24/12 and 3/25/12, there was no medical professional or staff person who completed the Department's medication administration training on duty from 7:00pm to 11:00pm. There are numerous residents at the home who have current prescriptions for PRN medications.	4.5.12	182b: THE SCHEDULE WAS ADJUSTED IMMEDIATELY SO THAT A MED TECH IS IN HOUSE TO COVER THOSE RESIDENTS THAT WHO REQUIRE MEDICATION ADMINISTRATION ON THE DAYS IT IS REQUIRED. (SEE ATTACHED) THE EXECUTIVE DIRECTOR WILL MONITOR WEEKLY IN STANDUP TO ASSURE COMPLIANCE.	4/9/12 B.B.

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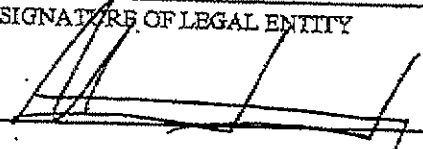
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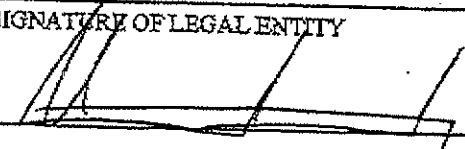
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(3) A student nurse of an approved nursing program functioning under the direct supervision of a member of the nursing school faculty who is present in the home. (4) A staff person who has completed the medication administration training in 190 for the administration of oral; topical; eye, nose and ear drop prescription medications; insulin injections and epinephrine injections for insect bites or other allergies.		4.5.12	11 see previous page	see previous page

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187c If a resident refuses to take a prescribed medication, the refusal shall be documented in the resident's record and on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. Subsequent refusals to take a prescribed medication shall be reported as required by the prescriber.	The chart for resident #2 included documentation that they refused several of their prescribed medications at 8:00pm on 3/8/12 and 3/10/12 and that they refused several prescribed medications at 8:00am on 3/11/12. None of these refusals were reported to the prescriber.	T.S.12	187C: THE NURSING DEPARTMENT WAS INSERVICED ON 4-3-12 ON THE PROPER REQUIREMENTS WHEN A RESIDENT REFUSES A MEDICATION BY THE RESIDENT SERVICES COORDINATOR AND THE EXECUTIVE DIRECTOR THE REFUSAL WILL BE DOCUMENTED IN THE RESIDENT RECORD, AND THE MAR, REPORTED WITH IN 24 HOURS. RSS DID NOT REPORT THE REFUSAL AND DID NOT FOLLOW PROTOCOL	4/9/12 BB

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PERSONAL CARE HOMES - 55 Pa. Code Chapter 2600

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227g Individuals who participate in the development of the support plan shall sign and date the support plan.	The updated support plan for resident #3, dated 12/1/11, was not signed by any representative from the home who participated in it's development. The resident was the only person who signed the plan.	4.5.12	227G: THE SUPPORT PALNE FOR RESIDENT #3 WAS SIGNED IMMEDIATELY BY THE EXECUTIVE DIRECTOR. ALL NEW MOVE INS WILL BE REVIEWED WEEKLY IN STAND UP TO ASSURE COMPLIANCE BY THE EXECUTIVE DIRECTOR. THE EXECUTIVE DIRECTOR FAILED TO SIGN THE FORM.	4/9/12 B.S.