



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**MAILING DATE: October 26, 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 August 31, 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 black ink that reads "Chevon Miller" followed by a stylized monogram or initials.

Chevon Miller  
Regional Licensing Administrator



Violation Report: 12995 - 08/31/2012 - Kurtz, Andrea  
 PCH Name: ARDEN COURTS OF KING OF PRUSSIA

**1. REGULATION 56 Pa.Code §2600**

2600.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

**2a. DESCRIPTION OF VIOLATION**

On 8-25-12 at 11:30 pm, an allegation of abuse against Resident #1 was reported to staff person A. The home did not report the allegation to the local area agency on aging until 8-26-12 at 4:00 pm.

**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)**

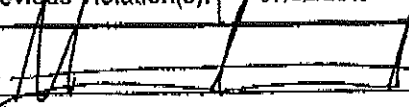
*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

The nursing staff was in-serviced on how to properly and timely report suspected abuse to the proper authorities in accordance with the older adult protective service act. The in-service was held on 9-21-2012

Repeat Violation: Yes

Date(s) of Previous Violation(s): 07/02/2012

Signature of Legal Entity Representative  
 (Required on EVERY Page)



Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page)

Mark D. Dwyer

Date

9/21/12

**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of

10/4/12  
 (Date)

Plan of correction implementation status as of

10/4/12  
 (Date)

The above plan of correction was approved by

CRM  
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented