



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: August 17, 2015

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

RE: Arden Courts King of Prussia
620 West Valley Forge Road
King of Prussia, Pennsylvania 19406
License # 129950

Dear Mr. Lazarus:

As a result of the Department of Human Services' licensing inspection on April 2, 2015 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in cursive script that reads "Roslyn Brewer".

Roslyn Brewer
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

Violation Report: 12995 - 04/02/2015 -
 PCH Name: ARDEN COURTS OF KING OF PRUSSIA

1. REGULATION 55 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 3/27/15, 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.

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.

15(a)

On 3/30/2015 Staff person A received a phone call from resident's son questioning care.

The resident moved-out from the community on 3/28/2015.

Date: 3/28/2015

Move out summary attached.

Resident incidents will be discussed during the Morning Kick-Off Meeting to ensure reporting compliance. These procedures, including immediately reporting suspected abuse, were reviewed during an in-service with Coordinators by the Executive Director on 6/10/2015.

Date: 6/10/2015 and on-going

Attendance sheet attached.

Office on Aging will conduct an in-service on 7/14/2015 regarding regulation 15(a) re. the home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Service Act and 6 Pa. Code Sections 15.21-15 and 15.27 and comply with the regulations regarding restrictions on staff persons.

Date: 7/14/2015

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Nicole C. Gruff*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Nicole C Gruff, Executive Dir* Date *6/15/15*

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

The above plan of correction is approved as of *6/15/15*
 (Date)

Plan of correction implementation status as of *6/15/15*
 (Date)

The above plan of correction was approved by *[Signature]*
 (Initials)

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

Violation Report: 12995 - 04/02/2015 -
 PCH Name: ARDEN COURTS OF KING OF PRUSSIA

1. REGULATION 55 Pa.Code §2600

2600.16(c) - 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 section 2600.15 (relating to abuse reporting covered by law).

2a. DESCRIPTION OF VIOLATION

On 3/27/15, staff member A received an allegation that resident #1 had been neglected in the home. The home did not submit an incident report to the Department.

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.

16(c)

The resident moved-out from the community on 3/28/2015.

Date: 3/28/2015

Move-out summary attached.

Resident incidents will be discussed during the Morning Kick-Off Meeting to ensure reporting compliance. These procedures, including reporting procedures, were reviewed during an in-service with Coordinators by the Executive Director on 6/10/2015

Date: 6/10/15 and on-going

Attendance sheet attached.

Office on Aging will conduct an in-service on 7/14/2015 regarding regulation 16(c) re. reporting 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 section 2600.15 (relating to abuse reporting covered by law.)

Date: 7/14/2015

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Nicole C. Gruff

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

Nicole C. Gruff Executive Director

Date

6/15/15

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6/15/15
 (Date)

Plan of correction implementation status as of

6/15/15
 (Date)

The above plan of correction was approved by

AG
 (Initials)

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Violation Report: 12995 - 04/02/2015 -
 PCH Name: ARDEN COURTS OF KING OF PRUSSIA

1. REGULATION 55 Pa.Code §2600

2600.54(a) - Direct care staff persons shall have the following qualifications:

- (1) Be 18 years of age or older, except as permitted in § 2600.54(b).
- (2) Have a high school diploma, GED diploma, or active registry status on the Pennsylvania nurse aide registry.
- (3) Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care services with reasonable skill and safety.

2a. DESCRIPTION OF VIOLATION

Direct care staff person B does not have a high school diploma, GED diploma, or active registration status on the Pennsylvania nurse aide registry.

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.

54(a)

A waiver was submitted to the Department to accept staff person B's educational credentials. The waiver was denied on April 10, 2015. Waiver request and denial letter attached.

The Executive Director has scheduled with PA Career Link to have staff person B take the TABE (6/16/2015), so that she will meet the educational requirements for direct care staff person qualifications. Test results will be submitted to the Department.

Date: 6/16/15 and on-going)

An audit of employee files was conducted by the Administrative Service Coordinator or designee to ensure compliance with Regulation 54(a) re. direct care staff person's qualifications. Follow up will be completed.

Date: 5/1/2015

The Executive Director or designee will audit the credentials of newly hired employees to ensure compliance with Regulation 54(a).

Date: 6/10/2015 and on-going

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Micole C. Groff*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Micole C. Groff Executive Director* Date *6/15/15*

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The above plan of correction is approved as of *6/15/15* (Date)

The above plan of correction was approved by *[Signature]* (Initials)

Plan of correction implementation status as of *6/15/15* (Date)

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Violation Report: 12995 - 04/02/2015 -

PCH Name: ARDEN COURTS OF KING OF PRUSSIA

1. REGULATION 55 Pa.Code §2600

2600.225(a) - A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

2a. DESCRIPTION OF VIOLATION

Resident #1 has thin, fragile skin that easily tears and bruises. This information is not included in the resident's most recent assessment dated 10/31/14.

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.

225(a)

The resident moved-out from the community on 3/28/2015.

Date: 3/28/2015

Move-out summary attached.

The Executive Director or designee will audit resident assessments to ensure compliance with regulation 225(a) re. a resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission.

Date: 6/10/2015

The Executive Director or designee will review resident assessments during the Morning Kick Off Meeting and follow up accordingly with changes and or additions to assessment.

Date: 6/10/2015 and on-going

The Executive Director in-serviced coordinators regarding regulation 225(a) re. a resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission.

Date: 6/10/2015

Attendance sheet attached.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Nicole C. Groff

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

Nicole Groff Executive Dir

Date *6/15/15*

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[Signature]
(Initials)