



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

JUN 05 2017

Mr. Martin D. Allen,  
Director  
Arden Courts of Allentown PA LLC  
333 North Summit Street  
Toledo, Ohio 43604

RE: Arden Courts of Allentown  
5151 Hamilton Boulevard  
Allentown, Pennsylvania 18106  
License #: 217870

Dear Mr. Allen:

As a result of the Department of Human Services' annual licensing inspection on March 29, 2017 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Inspection](https://www.surveymonkey.com/r/BHSL_Inspection).

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Rowe".

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary



Violation Report: 21787 - 03/29/2017 - Harvey, Jason  
 PCH Name: ARDEN COURTS OF ALLENTOWN

1. REGULATION 55 Pa.Code §2600  
 2600.162(c) - Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

2a. DESCRIPTION OF VIOLATION  
 The home only had the current week's menu posted throughout the facility.

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.


\* Please See Attached  
 a. menu posting photograph  
 b. Coordinator inservice sheet (162c)

Repeat Violation: No	Date(s) of Previous Violation(s):	N/A
----------------------	-----------------------------------	-----

Signature of Legal Entity Representative  
 (Required on EVERY Page) Melissa Miller

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) Melissa Miller, Executive Director Date 4/19/17

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

The above plan of correction is approved as of <u>5-6-17</u> (Date)  The above plan of correction was approved by  (Initials)	Plan of correction implementation status as of <u>5-6-17</u> (Date) <input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented
--	---

12 Aug 3

162(c)

1) The weekly menu for the week in advance was posted on March 29, 2017, at the time the survey was occurring by [REDACTED] Executive Director

~~(Attachment: Notice of week in advance weekly menu posted)~~

2) The Executive Director or designee will complete rounds on a weekly basis to ensure the current and week in advance weekly menus are posted in a conspicuous, public place.

April 17, 2017 and on-going

3) The Coordinators, including the Food Service Coordinator, were in-serviced on regulation 162 (c) re. current and week in advance weekly menus will be posted throughout the community in a conspicuous, public place by 4/18/2017.

~~(Attachment: In-Service Attendance Record)~~

Q\*  
5-6-17

Violation Report: 21787 - 03/29/2017 - Harvey, Jason  
PCH Name: ARDEN COURTS OF ALLENTOWN

1. REGULATION 55 Pa.Code §2600  
2600.251(b) - The entries in a resident's record shall be permanent, legible, dated and signed by the staff person making the entry.

2a. DESCRIPTION OF VIOLATION  
Correction fluid was used in the Formal Supports Section of the RASP for resident #1 dated 10/14/16.

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.*

\* Please see attached  
a - New RASP for resident L.H.  
b - Coordinator in Service Sheet on regulation (251b)

Repeat Violation: No      Date(s) of Previous Violation(s): N/A


Signature of Legal Entity Representative  
(Required on EVERY Page) Melissa Miller

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) Melissa Miller, Executive Director      Date 4/19/17

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

The above plan of correction is approved as of 5-6-17  
(Date)

Plan of correction implementation status as of 5-6-17  
(Date)

The above plan of correction was approved by   
(Initials)

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

P3A  
§ 3

251(b)

1) A new RASP (Formal Supports Section) for resident #1 has been completed by the Executive Director on 4/18/17 which does not include correction fluid.

~~(Attachment: RASP - Formal Supports Section)~~

2) All RASPs were audited by the Executive Director or designee to ensure correction fluid has not been applied to any other documents on 4/18/17.

3) The Executive Director or designee will audit all future RASPs to ensure correction fluid has not been applied to the document.

(4/18/17 and going forward)

4) 3) The Coordinators were in-serviced on regulation 251 (b) re. the resident's records shall be permanent, legible, dated, and signed by the person making the entry. In addition, correction fluid is not permitted in the community nor should be used on any document. (date)

~~(Attachment: In-Service - Mandated Record)~~

Ref  
5-6-17