



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: [REDACTED]

Mailing Date: July 19, 2018

Mr. Martin D. Allen  
Director  
Old Orchard Health Care Center – Easton PA LLC  
333 North Summit Street  
Toledo, Ohio 43604

RE: Arden Courts of Old Orchard  
4098 Freemansburg Avenue  
Easton, Pennsylvania 18045  
License # 226041

Dear Mr. Allen:

As a result of the Department's Bureau of Human Services Licensing inspection on May 22, 2018 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 black ink that reads "Michele Moskalczyk".

Michele Moskalczyk  
Human Services Licensing Supervisor

Enclosure  
Licensing Inspection Summary



Violation Report: 22604 - 05/22/2018 - O'Haire, Anne  
 PCH Name: ARDEN COURTS OF OLD ORCHARD

**1. REGULATION 55 Pa.Code §2600**  
 2600.42(b) - A resident may not be neglected, infirmidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

**2a. DESCRIPTION OF VIOLATION**  
 On 4/30/18 Resident # 1 pushed Resident # 2 causing the resident to fall. The fall resulted in Resident # 2 sustaining a fractured hip and a closed head injury. Nursing notes indicate that Resident # 1 has been aggressive to other residents on 12/3/17, 12/12/17, 1/18/18, 4/18/18 & 4/20/18.

**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.*

Resident #1 has since moved out of the community as of 5/15/18. Please see Attachment #1 (Move out summary). Medication changes were initiated (Attachments 2 & 3) after behavioral changes and resident #1 was placed on 15 minute checks, and 1:1 monitoring as needed. Following last incident, resident #1 was admitted to behavioral unit, then transferred to another community shortly thereafter. Resident #2 completed physical therapy, and is ambulating independently and has returned to her baseline (Please see Attachment #6 & 7). Staff members complete hourly checks to ensure resident safety. Administrator and Resident Services Coordinator to ensure continued compliance.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	04/10/2017
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Signature of Legal Entity Representative  
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
Arlene Henry, Executive Director	7/6/18

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

The above plan of correction is approved as of <u>7/12/18</u> (Date)	Plan of correction implementation status as of <u>7/12/18</u> (Date)
The above plan of correction was approved by <u>[Signature]</u> (Initials)	<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

Violation Report: 22604 - 05/22/2018 - O'Haire, Anne  
 PCH Name: ARDEN COURTS OF OLD ORCHARD

**1. REGULATION 55 Pa.Code §2600**  
 2600.231(b) - A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner, documented on a form provided by the Department, within 60 days prior to admission. Documentation shall include the resident's diagnosis of Alzheimer's disease or other dementia and the need for the resident to be served in a secured dementia care unit.

**2a. DESCRIPTION OF VIOLATION**  
 Resident # 3 was admitted to the home on 10/30/17, the initial DME was completed on 8/18/17.  
 Resident # 2 was admitted to the home on 7/2/17, the DME completed on 7/10/17 does not include a diagnosis of dementia or Alzheimer's.

**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.*

Executive Director and Resident Services Coordinator currently review all support plans weekly. An audit tool, accepted by DHS as per terms of legal agreement, has been initiated to track all due dates. All resident support plans are updated every 6 months, and as needed. Resident #2 and #3 have current and updated support plans- Please See Attachments #4 & Attachment #5. Executive Director to ensure continued compliance.

Repeat Violation: Yes      Date(s) of Previous Violation(s): 04/10/2017

Signature of Legal Entity Representative  
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative      Date  
 (Required on EVERY Page)      Arlene Henly, Executive Director      7/8/18

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The above plan of correction is approved as of 7/12/18  
 (Date)

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

Plan of correction implementation status as of 7/12/18  
 (Date)

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

Violation Report: 22604 - 05/22/2018 - OHaira, Anne  
 PCH Name: ARDEN COURTS OF OLD ORCHARD

1. REGULATION 55 Pa.Code §2600  
 2600.234(d) - The support plan shall be revised at least annually and as the resident's condition changes.

2a. DESCRIPTION OF VIOLATION  
 Resident # 1's DME dated 1/4/18 has not been updated to reflect the resident's aggressive behaviors and what the home is going to implement to prevent the behaviors. The resident was aggressive on 4/19/18 and on 4/20/18 to two different residents.

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.

All resident behavioral changes are discussed at morning meeting, and charts updated at that time, or immediately following adverse events. Resident Services Coordinator was inserviced on the importance of timely updates -Please See Attachment #8. Weekly reviews of support plans and updates are also completed by Executive Director and Resident Services Coordinator, utilizing the audit tool accepted by DHS as per settlement agreement. Executive Director to oversee to ensure continued compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
Arlene Henry, Executive Director	7/6/18

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