

Department of Human Services  
Bureau of Human Service Licensing

September 1, 2020

GARY ACHILLES, ADMINISTRATOR  
ARDEN COURTS WARMINSTER OF HATBORO PA LLC  
333 NORTH SUMMIT ST, 16TH FLOOR  
TOLEDO, OH 43604

RE: ARDEN COURTS OF WARMINSTER  
779 WEST COUNTY LINE ROAD  
HATBORO, PA, 19040  
LICENSE/COC#: 12996

Dear Mr. Achilles,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/12/2020, 08/13/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Shawn Parker

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Department of Human Services  
Bureau of Human Service Licensing  
LICENSING INSPECTION SUMMARY**

**Facility Information**

Name: *ARDEN COURTS OF WARMINSTER* License #: *12996* License Expiration Date: *06/14/2021*  
Address: *779 WEST COUNTY LINE ROAD, HATBORO, PA 19040*  
County: *BUCKS* Region: *SOUTHEAST*

**Administrator**

Name: *Gary Achilles* Phone: *2159575182* Email:  
*GARY.ACHILLES@HCR-MANORCARE.COM;*  
*shparker@pa.gov*

**Legal Entity**

Name: *ARDEN COURTS WARMINSTER OF HATBORO PA LLC*  
Address: *333 NORTH SUMMIT ST, 16TH FLOOR, TOLEDO, OH, 43604*  
Phone: *2159575182* Email: *LICENSURE-SUPPORT@HCR-MANORCARE.COM*

**Certificate(s) of Occupancy**

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *74* Waking Staff: *56*

**Inspection**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Incident* Exit Conference Date: *08/13/2020*

**Inspection Dates and Department Representative**

*08/12/2020 - Off-Site: Sabrina Freeman*  
*08/13/2020 - Off-Site: Sabrina Freeman*

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *60* Residents Served: *37*

**Secured Dementia Care Unit**

In Home: *Yes* Area: *Entire Bldg* Capacity: *37* Residents Served: *37*

**Hospice**

Current Residents: *NM*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *37*  
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *37* Have Physical Disability: *0*

## Inspections / Reviews

## 08/12/2020 - Partial

Lead Inspector: *Sabrina Freeman*Follow-Up Type: *POC Submission*Follow-Up Date: *08/26/2020*

## 8/31/2020 - POC Submission

Lead Reviewer: *Shawn Parker*Follow-Up Type: *Document Submission*Follow-Up Date: *09/08/2020*

## 9/1/2020 - Document Submission

Lead Reviewer: *Shawn Parker*Follow-Up Type: *Not Required*

## 185a - Implement Storage Procedures

**1. Requirements**

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

**Description of Violation**

*On 7/25/20, at approximately 3:30pm during the change of shift narcotic inventory count, the home was unable to locate 14 syringes of morphine. The morphine was never found and the home is unable to account for the missing medication.*

**Plan of Correction****Accept**

- *At the change of shift narcotics count on July 25, 2020, 14 syringes of a resident's morphine (0.25 ml, sub-lingual, given daily at 5pm) were discovered to be missing by the nurses on duty.*
- *During the period of July 25, 2020 through August 13, 2020, the incident was thoroughly investigated by the Executive Director, Resident Services Coordinator, local authorities and DHS representative, Sabrina Freeman. Please see attached.*
- *On July 25, 2020, the Resident Services Coordinator in-serviced the nurses on duty on the community's Controlled Substances Policy. Please see attached.*
- *On July 27, 2020, the Executive Director in-serviced the Coordinators on the requirement of keeping the health center door locked. Please see attached.*
- *On August 17, 2020, the nurses on duty at the time of the incident received a disciplinary warning outlining their immediate termination of employment if they are involved in an incident of missing controlled substances. Please see attached.*
- *On August 21, 2020, the Regional Quality Assurance Consultant in-serviced many of our nurses and med techs on Regulation 185a, with emphasis on their duty to be responsible for ensuring the safe storage, access, security and distribution of medications to reduce the risk that medications will be misplaced, lost or misused. Please see attached. Additional in-services will be provided for the rest of the nurses and med techs on Regulation 185a on or before September 30, 2020.*
- *In addition to the immediate actions taken, a systematic approach to monitoring compliance with the community's Controlled Substance Policy has been instituted. During the period of August 24, 2020 through February 28, 2021, the Resident Services Coordinator or designee will also randomly check the Shift Change Accountability Record For Controlled Substances for accuracy. The Random Checks will be maintained in the community and available for surveyor review. Please see attached. Should a discrepancy be noted, the Resident Services Coordinator will immediately rectify the situation and in-service the nurses/med techs as needed.*

**Completion Date:** 08/26/2020

**Document Submission****Implemented**

*Documentation attached on 8/31/2020.*