

Department of Human Services  
Bureau of Human Service Licensing

December 14, 2021

[REDACTED]  
ARDEN COURTS OF YARDLEY PA LLC  
[REDACTED]  
[REDACTED]

RE: ARDEN COURTS OF YARDLEY  
493 STONY HILL ROAD  
YARDLEY, PA, 19067  
LICENSE/COC#: 12997

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/19/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

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 YARDLEY* License #: *12997* License Expiration:  
Address: *493 STONY HILL ROAD, YARDLEY, PA 19067*  
County: *BUCKS* Region: *SOUTHEAST*

**Administrator**

Name: [REDACTED] Phone: *2153216166* Email: [REDACTED]

**Legal Entity**

Name: *ARDEN COURTS OF YARDLEY PA LLC*  
Address: *333 NORTH SUMMIT ST, 16TH FLOOR, TOLEDO, OH, 43604*  
Phone: *2153216166* Email: [REDACTED]

**Certificate(s) of Occupancy**

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *72* Waking Staff: *54*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Incident* Exit Conference Date: *11/19/2021*

**Inspection Dates and Department Representative**

11/19/2021 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *66* Residents Served: *36*

**Secured Dementia Care Unit**

In Home: *Yes* Area: *SDCU* Capacity: *66* Residents Served: *36*

**Hospice**

Current Residents: *4*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *30*  
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *36* Have Physical Disability: *0*

**Inspections / Reviews**

11/19/2021 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/10/2021*

Inspection Dates and Department Representative (*continued*)

11/19/2021 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *12/20/2021*

11/19/2021 - Document Submission

Reviewer: [REDACTED] Follow-Up Type: *Not Required*

60a - Staff/Support Plan

Staffing

1. Requirements

2600.

60.a. Staffing shall be provided to meet the needs of the residents as specified in the resident's assessment and support plan.

Description of Violation

On 11/14/21, residents #1, #2, #3, #4 did not receive Levothyroxin Tabs as prescribed. This service could not be provided due to no Med Techs staffed on 11/14/21 from 12:00am to 7:00 am.

Document Submission

Staffing schedules were reviewed to ensure a nurse and/or medtech were on schedule each shift each day for the following month by the Executive Director(ED) on 11/20/2021.

Daily staffing will be reviewed by the ED and/or Resident Services Coordinator(RSC) on a weekly basis to ensure a nurse and/or medtech are on schedule for each shift each day. If a nurse/medtech is not on schedule for any shift, one will be scheduled. If a call off occurs. the nurse who received the call off will complete the Call Off Replacement Log and will notify the RSC to ensure proper coverage can be found, from 12/13/2021 to 3/31/2022. Call Off Replacement Log will be available to the Department for survey review.

All nurses will be educated by the ED/RSC on the process/procedure for managing replacement of nurses/medtechs who call off for their scheduled shift and completion of the Call Off/Replacement Log by 12/31/2021. (see attached inservice outline and blank Call Off/Replacement Log) The Call Off/Replacement Log will be available for survey review.

A copy of the signed inservice attendance record will be forwarded to the Department upon completion

Completion Date: 03/31/2021

Document Submission

Implemented

see attached documents

Completion Date: 12/14/2021

187b - Date/Time of Medication Admin.

Medications

1. Requirements

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

Residents #5, #6, #7, #8, #9, #10, #11, #12, #13, #14, and #15's medication administration records (MAR'S) do not include the initials of the staff person who administered 8PM medications on 11/17/2021.

Document Submission

RSC contacted the medtech who was assigned to administer medications at 8pm on 11/17/2021 to those residents listed. Medtech confirmed the medications were given, but [redacted] forgot to initial. Caregiver who was partnered in that unit on 11/17/2021 confirmed [redacted] witnessed medications being given at that time.

An audit of all MARS was completed on 11/30/2021 by the ED to ensure that all medications were given and initialed as required. (see attached completed audits)

All MARs will be collected by the RSC, or designee, after each morning medication pass. RSC, ED or designee will

### Medications (continued)

review all MARs to ensure medications were given and initialed as required, from 12/13/2021 to 3/31/2022. If a medication is not initialed as required, the medtech/nurse who was assigned to give that medication will be contacted to verify that medication was given as prescribed and will be required to come in to initial within 24hrs of notification. An MAR Daily Audit Tool will be completed and will be available to the Department for survey review.

RSC will re-educate all nurses and medtechs on this regulation and the expectation that they record all the required information on the MAR, including their initials, at the time the medication is administered by 12/31/2021. (see attached inservice outline)

**Completion Date:** 03/31/2021

#### Document Submission

**Implemented**

see attached documents

**Completion Date:** 12/14/2021

## 187d - Follow Prescriber's Orders

### Medications

#### 1. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

#### Description of Violation

Resident #1 is prescribed Levothyroxin Tab 75MCG take one tablet by mouth once daily. However, resident #1 was not administered this medication on 11/14/21.

Resident #2 is prescribed Levothyroxin Tab 25MCG take one tablet by mouth once daily. However, resident #2 was not administered this medication on 11/14/21.

Resident #3 is prescribed Levothyroxin Tab 125MCG take one tablet by mouth once daily. However, resident #3 was not administered this medication on 11/14/21.

Resident #4 is prescribed Levothyroxin Tab 125MCG take one tablet by mouth once daily. However, resident #4 was not administered this medication on 11/14/21.

Resident #5 is prescribed Levothyroxin Tab 75MCG take 1 tablet by mouth once daily except Sundays. On Thursday 11/11/21, resident #5 was not administered this medication. On Sunday 11/7/21 and Sunday 11/14/21, resident 5 was administered this medication.

Resident #5 is prescribed Galantamine Tab 12MG take one tablet by mouth twice a day. However on 11/11/21, this medication was only administered once.

#### Document Submission

Upon discovering the medication errors, RSC contacted the prescribing physician for residents #1, #2, #3 & #4, same for all residents; no follow up instructions were provided by the prescriber.

Resident Services Supervisor(RSS) contacted physician for Resident #5 on 11/30/2021. Physician ordered TSH lab be completed. Lab result showed no issues; order given on 12/7/2021 for med to be given daily. No other follow up instructions were provided by the prescriber regarding the missed Galantamine.

### Medications (continued)

*A reportable incident was completed regarding this medication error on 12/1/2021 and sent to the Department. (see attached)*

*An audit was completed by the ED to ensure that all medications were given as prescribed on 11/30/2021. (see MAR audit attached on 187b)*

*ED, RSC or designee will complete a medcart/MAR audit on a weekly basis to ensure medications are being administered as ordered, from 12/13/2021 to 3/31/2022. Audits will be available to the Department for survey review.*

*RSC will educate all medtechs and nurses on this regulation and the expectation that all the medications are given as prescribed by the resident's physician by 12/31/2021. (see attached inservice outline)*

*A copy of the signed inservice attendance record will be forwarded to the Department upon completion.*

**Completion Date:** 03/31/2021

**Document Submission**

**Implemented**

*see attached documents*

**Completion Date:** 12/14/2021

## 188c - Medication Error Documentation

### Medications

#### 1. Requirements

2600.

188.c. Documentation of medication errors and the prescriber's response shall be kept in the resident's record.

#### Description of Violation

*Resident #1 is prescribed Levothyroxin Tab 75MCG take one tablet by mouth once daily. However, resident #1 was not administered this medication on 11/14/21. There is no documentation of the error and the prescriber's response in the resident's record.*

*Resident #2 is prescribed Levothyroxin Tab 25MCG take one tablet by mouth once daily. However, resident #2 was not administered this medication on 11/14/21. There is no documentation of the error and the prescriber's response in the resident's record.*

*Resident #3 is prescribed Levothyroxin Tab 125MCG take one tablet by mouth once daily. However, resident #3 was not administered this medication on 11/14/21. There is no documentation of the error and the prescriber's response in the resident's record.*

*Resident #4 is prescribed Levothyroxin Tab 125MCG take one tablet by mouth once daily. However, resident #4 was not administered this medication on 11/14/21. There is no documentation of the error and the prescriber's response in the resident's record.*

#### Document Submission

*RSC documented a late entry of the prescriber's response on the reportable incident for each resident on 12/8/2021. (see attached)*

*Documentation of medication errors and the prescriber's response will be included in all resident records, as appropriate, moving forward.*

*A Reportable Incident and Condition Trending Log will be completed to include the prescriber's notification and*

### Medications (continued)

response to medication errors and included in the resident record. (see attached blank Reportable Incident and Condition Trending Form). The Reportable Incident and Condition Trending Log will be available to the Department for survey review.

ED will educate RSC and all nurses on the regulation and expectation that documentation of medication errors and the prescriber's response being included on the Reportable Incident and included in the resident record. (see attached inservice outline)

A copy of the signed inservice attendance record will be forwarded to the Department upon completion.

**Completion Date:** 03/31/2021

#### Document Submission

**Implemented**

see attached documents

**Completion Date:** 12/14/2021

## 252 - Record Content

### Resident Records

#### 1. Requirements

2600.

252. Content of Resident Records - Each resident's record must include the following information:

10. A record of incident reports for the individual resident.

#### Description of Violation

Residents 1, Resident 2, resident 3 and resident 4's records do not include the incident report dated 11/14/21.

#### Document Submission

A copy of the incident report dated 11/14/21 was placed in the record for Resident #1, #2, #3 & #4.

ED completed an audit of all resident records to ensure that an incident report was included for any incidents occurring in 2021; any missing incident reports were placed in the resident record.

A Reportable Incident and Condition Trending Log will be completed to include a copy of the incident report was placed in the resident's record., from 12/13/2021 to 3/31/2022. (see attached blank Reportable Incident and Condition Trending Log included in 188c) The Reportable Incident and Condition Trending Log will be available for the Department for survey review.

ED will educate coordinators, administrative staff and all nurses on the regulation and expectation that a copy of the incident report must be included in the resident's record. (see attached inservice outline in 188c)

A copy of the signed inservice attendance record will be forwarded to the Department upon completion.

**Completion Date:** 03/31/2021

#### Document Submission

**Implemented**

see attached documents

**Completion Date:** 12/14/2021