

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC

June 9, 2023

[REDACTED] DIRECTOR OF OPERATIONS
ARDEN COURTS OF KING OF PRUSSIA PA LLC
[REDACTED]

RE: ARDEN COURTS (KING OF PRUSSIA)
620 WEST VALLEY FORGE ROAD
KING OF PRUSSIA, PA, 19406
LICENSE/COC#: 12995

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/22/2023, 06/02/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: ARDEN COURTS (KING OF PRUSSIA) **License #:** 12995 **License Expiration:** 12/29/2023
Address: 620 WEST VALLEY FORGE ROAD, KING OF PRUSSIA, PA 19406
County: MONTGOMERY **Region:** SOUTHEAST

Administrator

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

Legal Entity

Name: ARDEN COURTS OF KING OF PRUSSIA PA LLC
Address: [REDACTED]
Phone: [REDACTED]

Certificate(s) of Occupancy

Type: C 2 LP **Date:** 05/10/1995 **Issued By:** Commonwealth of PA, L&I

Staffing Hours

Resident Support Staff: **Total Daily Staff:** 112 **Waking Staff:** 84

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 05/22/2023

Inspection Dates and Department Representative

05/22/2023 On Site [REDACTED]
 06/02/2023 Off Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 64 **Residents Served:** 56

Secured Dementia Care Unit

In Home: Yes **Area:** Entire Home **Capacity:** 64 **Residents Served:** 56

Hospice

Current Residents: 13

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 56
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 56 **Have Physical Disability:** 1

Inspections / Reviews

05/22/2023 - Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 06/12/2023

06/08/2023 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 06/08/2023
Reviewer: [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 06/13/2023

Inspections / Reviews *(continued)*

06/09/2023 - Document Submission

Submitted By [REDACTED]

Date Submitted: 06/08/2023

Reviewer [REDACTED]

Follow-Up Type: *Not Required*

187a - Medication Record

1. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

1. Resident's name.
2. Drug allergies.
3. Name of medication.
4. Strength.
5. Dosage form.
6. Dose.
7. Route of administration.
8. Frequency of administration.
9. Administration times.
10. Duration of therapy, if applicable.
11. Special precautions, if applicable.
12. Diagnosis or purpose for the medication, including pro re nata (PRN).
13. Date and time of medication administration.
14. Name and initials of the staff person administering the medication.

Description of Violation

Resident #1's March 2023 and April 2023 medication administration records state resident #1 is prescribed [REDACTED] - Apply topically to vaginal area and intergluteal folds twice daily. However, this order was changed to PRN on 02/22/2023.

- Resident #1's March 2023 treatment administration records states resident #1 is prescribed [REDACTED] - Apply topically over affected areas, chest, back, arms, inner thighs, legs, leave overnight and wash in the morning. However, this treatment was completed, per physician's orders, on 02/22/2023.

Plan of Correction

Accept ([REDACTED] - 06/08/2023)

Resident#1 moved out of the community on [REDACTED].

See attachment Move Out Summary

The Resident Services Coordinator, Resident Services Supervisor s (RSS s) and medication technicians were in serviced by the Executive Director regarding Medication and Treatment Guidelines, regulation 187.a. and weekly Medication Cart Audits on May 24, 2023.

See attachment In service sheet

The Resident Services Coordinator or designee will complete weekly Medication Cart Audits to ensure compliance with regulation 187.a. Should a discrepancy be noted, the Resident Services Coordinator or designee will immediately rectify the situation.

See attachment Sample Medication Cart Audit & completed audits for 5/31/23 & 6/7/23. Time frame May 31, 2023, through December 2023

The Executive Director or designee will review the weekly Medication Cart Audits for compliance with regulation 187.a. Time frame May 31, 2023, through December 2023

Documentation of the weekly reviews will be noted in the quarterly Quality Management Meeting minutes. Second quarter (April, May, & June) Quality Management meeting scheduled for July 11, 2023. Third quarter (July, August & September) meeting scheduled for October 11, 2023. Fourth quarter (October, November & December) meeting scheduled for January 10, 2024. See attachment Quality Management Meeting format

Time Frame June 2023 through December 2023

187a - Medication Record (*continued*)

Licensee's Proposed Overall Completion Date: 12/31/2023

Implemented (MJ - 06/09/2023)

187d Follow Prescriber's Orders

2. Requirements

2600.

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

Description of Violation

Resident #1 is prescribed [REDACTED] - [REDACTED]. However, resident #1 was not administered this medication on [REDACTED]/23 and [REDACTED]/23 at 4:00 PM.

Resident #1 is prescribed [REDACTED] - [REDACTED]. However, resident #1 was not administered this medication on [REDACTED]/23 and [REDACTED]/23 at 4:00 PM.

Plan of Correction**Accept ([REDACTED] - 06/08/2023)**

Resident#1 moved out of the community on April 6, 2023.

See attachment-Move-Out Summary

The Medication Technician who did not initial the medication administration for Resident #1 on April 3 and 4, 2023 at 4pm was counseled regarding regulation 187.d. by the Resident Services Coordinator (RSC) on June 7, 2023.

See attachment-Counseling documentation

The Resident Services Coordinator, Resident Services Supervisor's (RSS's) and medication technicians were in-serviced by the Executive Director regarding Medication and Treatment Guidelines, regulation 187.d. and weekly Medication Cart Audits on May 24, 2023.

See attachment- In-service sheet

The Resident Services Coordinator or designee will complete weekly Medication Cart Audits to ensure compliance with regulation 187.d. Should a discrepancy be noted, the Resident Services Coordinator or designee will immediately rectify the situation. See attachment-Sample Medication Cart Audit & completed audits for 5/31/23 & 6/7/23. Time frame- May 31, 2023, through December 2023

The Executive Director or designee will review the weekly Medication Cart Audits for compliance with regulation 187.d. Time frame-May 31, 2023, through December 2023

Documentation of the weekly reviews will be noted in the quarterly Quality Management Meeting minutes. Second quarter (April, May, & June) Quality Management meeting scheduled for July 11, 2023.

Third quarter (July, August & September) meeting scheduled for October 11, 2023. Fourth quarter (October, November & December) meeting scheduled for January 10, 2024.

See attachment-Quality Management Meeting format Time Frame-June 2023 through December 2023

Licensee's Proposed Overall Completion Date: 12/31/2023

Implemented ([REDACTED] - 06/09/2023)

188b Medication Error Reporting

3. Requirements

2600.

188.b. A medication error shall be immediately reported to the resident, the resident s designated person and the prescriber.

188b - Medication Error Reporting (*continued*)**Description of Violation**

Resident #1 is prescribed [REDACTED]. However, resident #1 was not administered these medications on [REDACTED]/23 and [REDACTED]/23 at 4:00 PM. These medication errors were not reported to the resident, resident's designated person or prescriber.

Plan of Correction**Accept (MJ - 06/08/2023)**

Resident#1 moved out of the community on April 6, 2023.

See attachment-Move-Out Summary

The Resident Services Coordinator, Resident Services Supervisor's (RSS's) and medication technicians were in-serviced by the Executive Director regarding regulation 188.b. and weekly Medication Cart Audits on May 24, 2023.

See attachment- In-service sheet

The Resident Services Coordinator or designee will complete weekly Medication Cart Audits to ensure compliance with regulation 188.b. Should a discrepancy be noted, the Resident Services Coordinator or designee will immediately rectify the situation. Medication error reporting protocols will be followed. See attachment-Sample Medication Cart Audit & completed audits for 5/31/23 & 6/7/23. Time frame- May 31, 2023, through December 2023

The Executive Director or designee will review the weekly Medication Cart Audits for compliance with regulation 188.b. Time frame-May 31, 2023, through December 2023

Documentation of medication errors are reviewed in the quarterly Quality Management Meeting minutes under reportable incidents. See attachment-Quality Management Meeting format

Licensee's Proposed Overall Completion Date: 12/31/2023

Implemented (MJ - 06/09/2023)