

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

January 22, 2024

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

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

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/13/2023 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: 12/29/2024  
 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] Email: [REDACTED]

## Certificate(s) of Occupancy

Type: C-2 LP Date: 10/10/2023 Issued By: Department of L & I

## Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 116 Waking Staff: 87

## Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:  
 Reason: Complaint, Incident Exit Conference Date: 01/09/2024

## Inspection Dates and Department Representative

12/13/2023 - On-Site: [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

License Capacity: 64 Residents Served: 58

## Secured Dementia Care Unit

In Home: Yes Area: Memory Care Unit Capacity: 64 Residents Served: 58

## Hospice

Current Residents: 12

## Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 58  
 Diagnosed with Mental Illness: 58 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 58 Have Physical Disability: 1

## Inspections / Reviews

## 12/13/2023 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 01/21/2024

Inspections / Reviews *(continued)*

01/22/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/22/2024

Reviewer: [REDACTED]

Follow-Up Type: *Bypass Document  
Submission*

01/22/2024 - Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/22/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

141a 1-10 Medical Evaluation Information

1. Requirements

2600.

- 141.a. A resident shall have a medical evaluation by a physician, physician’s assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:
  - 1. A general physical examination by a physician, physician’s assistant or nurse practitioner.
  - 2. Medical diagnosis including physical or mental disabilities of the resident, if any.
  - 3. Medical information pertinent to diagnosis and treatment in case of an emergency.
  - 4. Special health or dietary needs of the resident.
  - 5. Allergies.
  - 6. Immunization history.
  - 7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
  - 8. Body positioning and movement stimulation for residents, if appropriate.
  - 9. Health status.
  - 10. Mobility assessment, updated annually or at the Department’s request.

Description of Violation

Resident [redacted] medical evaluation, dated 11/16/2023, did not include the medical information pertinent to diagnosis and treatment in case of an emergency, the immunology history, and body positioning and movement stimulation for residents, if appropriate.

Plan of Correction

Accepted [redacted] - 01/22/2024)

In response to the violation on 12/13/2023 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken:

- 1. on 12/07/2023 by the Executive Director to Resident [redacted] moved out of community on 12/7/2023 with [redacted] removing all of [redacted] belongings. Resident's chart became inactive.

To enhance the currently compliant operations:

- 1. On 01/17/2024 the Executive Director completed In-service with Memory Care Advisor and Resident Services Coordinator to review the DME and expectation of it being completely filled out with no blanks. Memory Care Advisor works with the physician and family on required paperwork to enter home, with a completion date of 1/17/2024. Attendance Record Attachment #1

The overall completion date is 01/17/2024.

Effective 01/19/2024 the Executive Director will perform audits with every move in with the MCA and RSC to maintain ongoing compliance with ensuring each resident has a medical evaluation by a physician, physician’s assistant or certified registered nurse practitioner documented on a form specified by the Department upon admission completed in its entirety. A new Required Document Audit form has been created to ensure all DMEs are completed appropriately going forward. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes. Audit Form Attachment #2 Completed Audit form will be available to Department Inspectors at any time to ensure compliance.

Proposed Overall Completion Date: 01/19/2024

Licensee's Proposed Overall Completion Date: 01/19/2024

Implemented [redacted] - 01/22/2024)

## 252 - Record Content

**2. Requirements**

2600.

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

1. Name, gender, admission date, birth date and Social Security number.
2. Race, height, weight, color of hair, color of eyes, religious affiliation, if any, and identifying marks.
3. A photograph of the resident that is no more than 2 years old.
4. Language or means of communication spoken or used by the resident.
5. The name, address, telephone number and relationship of a designated person to be contacted in case of an emergency.
6. The name, address and telephone number of the resident's physician or source of health care.
7. The current and previous 2 years' physician's examination reports, including copies of the medical evaluation forms.
8. A list of prescribed medications, OTC medications and CAM.
9. Dietary restrictions.
10. A record of incident reports for the individual resident.
11. A list of allergies.
12. The documentation of health care services and orders, including orders for the services of visiting nurse or home health agencies.
13. The preadmission screening, initial intake assessment and the most current version of the annual assessment.
14. A support plan.
15. Applicable court order, if any.
16. The resident's medical insurance information.
17. The date of entrance into the home, relocations and discharges, including the transfer of the resident to other homes owned by the same legal entity.
18. An inventory of the resident's personal property as voluntarily declared by the resident upon admission and voluntarily updated.
19. An inventory of the resident's property entrusted to the administrator for safekeeping.
20. The financial records of residents receiving assistance with financial management.
21. The reason for termination of services or transfer of the resident, the date of transfer and the destination.
22. Copies of transfer and discharge summaries from hospitals, if available.
23. If the resident dies in the home, a copy of the official death certificate.
24. Signed notification of rights, grievance procedures and applicable consent to treatment protections specified in § 2600.41 (relating to notification of rights and complaint procedures).
25. A copy of the resident-home contract.
26. A termination notice, if any.

**Description of Violation**

Resident [REDACTED]'s record does not include a record of incident reports for the individual resident.

**Plan of Correction**

Accept [REDACTED] - 01/22/2024)

In response to the violation on 12/13/2023 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 12/13/2023 by the Executive Director placed a copy of the incident report immediately to Resident [REDACTED]'s inactive record.

To enhance the currently compliant operations, on 01/17/2024 the Executive Director completed an In-service with RSC and ASC on the requirement of place a copy of any reportable incident reports in the resident's medical record.  
Attendance Record Attachment #1

**252 - Record Content (continued)**

*Effective 01/19/2024 the Executive Director will complete new log indicating the completed action of filing the incident report in resident's medical record after each reportable is sent. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.*

*New Reportable Incident Log Attachment #2*

*Reportable Incident will be available to Department Inspectors at anytime to ensure compliance.*

**Licensee's Proposed Overall Completion Date: 01/19/2024**

**Implemented [REDACTED] - 01/22/2024)**