

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

May 6, 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 02/05/2024 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**

**Staffing Hours**

Resident Support Staff: Total Daily Staff: 114 Waking Staff: 86

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #:  
 Reason: Monitoring Exit Conference Date: 02/05/2024

**Inspection Dates and Department Representative**

02/05/2024 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: 64 Residents Served: 57

**Secured Dementia Care Unit**

In Home: Yes Area: Entire area Capacity: 64 Residents Served: 57

**Hospice**

Current Residents: xx

**Number of Residents Who:**

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 57  
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 57 Have Physical Disability: 1

**Inspections / Reviews**

**02/05/2024 - Partial**

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/24/2024

**02/28/2024 - POC Submission**

Submitted By: [REDACTED] Date Submitted: 03/27/2024  
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 03/27/2024

Inspections / Reviews *(continued)*

05/06/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/27/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

183e - Storing Medications

1. Requirements

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

On [REDACTED], an opened bottle of [REDACTED] was in the medication cart without an open/discard after date. According to the manufacturer's instructions, the eye drop should be discarded 4 weeks after opening.

Plan of Correction

Accept [REDACTED] - 02/28/2024)

In response to the violation on 02/05/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 02/05/2024 by the Resident Services Coordinator who Immediately reordered new bottle of eye drops.

New bottle of eye drops received and dated properly by Resident Services Coordinator. Undated bottle discarded.

To enhance the currently compliant operations, on 02/19/2024 the Health & Wellness Specialist completed training with RSC and RSC completed training with ED and Medication technicians on regulation 183e, with a completion date of 02/23/2024.

Effective 02/05/2024 the Resident Service Coordinator or designee will perform weekly medication cart audits through 06/26/2024 to maintain ongoing compliance ensuring prescription medications, OTC medications and CAM will be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes. Medication cart audits are included in Quality Management Plan which is available for review by inspectors at any time.

Follow up documentation: 1. Photo of new bottle 2. Training Attendance Record 3. Med Cart Audits

Proposed Overall Completion Date: 03/26/2024

Licensee's Proposed Overall Completion Date: 03/26/2024

Implemented [REDACTED] - 05/06/2024)

185b - Medication Procedures

2. Requirements

2600.

185.b. At a minimum, the procedures must include:

- 2. A process to investigate and account for missing medications and medication errors.

Description of Violation

On [REDACTED] around [REDACTED], resident [REDACTED]. The resident was prescribed [REDACTED] solution twice a day and every 2 hours as needed. According to the controlled medication log for this medication, there were some remaining balances as of [REDACTED] at [REDACTED]. However, the medication was not in the medication

185b - Medication Procedures (continued)

cart and according to staff A, it was disposed by the overnight shift medication staff. The disposal information was not noted on the controlled medication log as required.

Resident [REDACTED] is prescribed [REDACTED] once daily at [REDACTED]. The controlled medication log shows one pill missing between [REDACTED] (amount remaining [REDACTED]) and [REDACTED] (amount at hand [REDACTED]). The home cannot explain this discrepancy.

Repeat Violation: 11/09/2023

Plan of Correction

Accept ([REDACTED] - 02/28/2024)

In response to the violation on 02/05/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken:

On 02/05/2024 the Resident Services Coordinator updated the Controlled Medication Record immediately. Resident [REDACTED]

On 02/05/2024 the Resident Services Coordinator reviewed the MAR and Controlled Medication Record finding 1/12/24 the LPN on duty signed out 6pm medication on the MAR but failed to sign out the dose on the Controlled Substance Record which accounts for the missing pill. Resident [REDACTED]

To enhance the currently compliant operations, on 2/18/2024 ED completed training with Medication Technicians on Regulation 185b and introduced new Controlled Substance audit tool and new color coding to assist them. On 02/19/2024 the Health & Wellness Specialist completed training on Regulation 185b with RSC and RSC completed training with ED and Medication technicians. Completion date of 02/23/2024.

Effective 02/09/2024 the Executive Director or designee will perform daily checks using a new Controlled Substance audit tool through 06/26/2024 to maintain ongoing compliance with ensuring, at a minimum, the procedures must include, including A process to investigate and account for missing medications and medication errors. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

- Follow up documentation: 1. Controlled Substance Record Resident [REDACTED]
- 2. MAR and Controlled Substance Record Resident [REDACTED]
- 3. Training Attendance Records
- 4. Controlled Substance Audit tool

Licensee's Proposed Overall Completion Date: 03/26/2024

Implemented ([REDACTED] - 05/06/2024)

187a - Medication Record

3. Requirements

2600.

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

Description of Violation

Resident [REDACTED] is prescribed [REDACTED]. However, the resident's Feb medication administration record (MAR) does not indicate the diagnosis for the medication.

## 187a - Medication Record (continued)

Resident [REDACTED] is prescribed [REDACTED] mg once daily. The resident's Feb MAR does not indicate the diagnosis for the medication.

Repeat Violation: 5/22/23 et al, 11/09/2023

**Plan of Correction**

Accept ( [REDACTED] 02/28/2024)

In response to the violation on 02/05/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 02/05/2024 by the Resident Services Coordinator by adding diagnosis of medications of Resident [REDACTED] & [REDACTED] MAR.

To enhance the currently compliant operations, on 02/19/2024 the Health & Wellness Specialist completed training on Regulation 187a with RSC and RSC completed training with ED and Medication technicians, with a completion date of 02/23/2024. On 2/22/2024 a meeting was held with OmniCare Pharmacy representative to review the importance of proper information being included on Resident MAR's and Physician's Order Sheets. During recaps corrections are made and forwarded to pharmacy with request to update profile.

To maintain ongoing compliance effective 2/5/2024 during weekly med cart audits MAR's will be checked for any missing information by Resident Services Coordinator and Executive Director. Recaps will be reviewed by Executive Director or designee prior to a new month to review MAR's for accuracy. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes and included on Quality Management reports which are available for review by inspectors at any time. Audits will be included thorough 6/26/2024.

Follow up documentation: 1. Training Attendance Record 2. MAR's & POS's for Resident [REDACTED] & [REDACTED] 3. Med Cart Audits

Proposed Overall Completion Date: 03/26/2024

Licensee's Proposed Overall Completion Date: 03/26/2024

Implemented [REDACTED] - 05/06/2024)

## 187b - Date/Time of Medication Admin.

**4. 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**

Resident [REDACTED] is prescribed [REDACTED] once daily at 06:00 PM. This medication was not administered on 01/12/2024 but there is staff initials present as administered on the resident's Jan MAR.

Resident [REDACTED] is prescribed [REDACTED] three times a day at 08:00 AM, 02:00 PM, and 08:00 PM. This medication was not signed out on [REDACTED] at 08:00 PM but there is staff initials present as administered on the resident's Feb MAR.

## 187b - Date/Time of Medication Admin. (continued)

Repeat Violation: 11/09/2023

**Plan of Correction**

Accept [REDACTED] - 02/28/2024)

In response to the violation on 02/05/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 02/05/2024, the Resident Services Coordinator reviewed the MAR and Controlled Medication Record finding 1/12/24 the LPN on duty signed out 6pm medication on the MAR but failed to sign out the dose on the Controlled Substance Record which accounts for the missing pill for Resident [REDACTED] indicating the medication was given.

To enhance the currently compliant operations, on 2/18/2024 ED completed training with Medication Technicians on Regulation 187b and introduced new Controlled Substance audit tool and new color coding to assist them. On 02/19/2024 the Health & Wellness Specialist completed training on Regulation 187b with RSC and RSC completed trainline with ED and Medication technicians. Completion date of 02/23/2024.

To maintain ongoing compliance effective 02/09/2024 the Executive Director or designee will perform daily checks using a new Controlled Substance audit tool through 06/26/2024 to maintain ongoing compliance with ensuring, at a minimum, the procedures must include, including A process to investigate and account for missing medications and medication errors. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Follow up documentation: 1. Training Attendance Records

2. MAR and Controlled Substance Record Resident [REDACTED]

3. Controlled Substance Audit Tool

Licensee's Proposed Overall Completion Date: 03/26/2024

Implemented [REDACTED] 05/06/2024)

## 187d - Follow Prescriber's Orders

**5. Requirements**

2600.

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

**Description of Violation**

Resident [REDACTED] is prescribed [REDACTED] once daily at 06:00 PM. This medication was not administered on [REDACTED].

Resident [REDACTED] is prescribed [REDACTED] three times a day at 08:00 AM, 02:00 PM, and 08:00 PM. This medication was signed not signed out/administered on [REDACTED] and [REDACTED] at 08:00 PM. The same resident is prescribed [REDACTED] daily at bed time. The resident was not administered this medication on [REDACTED] and [REDACTED].

Repeat Violation: 5/22/23 et al, 11/09/2023

**Plan of Correction**

Accept [REDACTED] - 02/28/2024)

In response to the violation on 02/05/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 02/05/2024, the Resident Services Coordinator reviewed the MAR and Controlled Medication Record finding 1/12/24 the LPN on duty signed out 6pm medication on the MAR but failed to sign out the dose on

**187d - Follow Prescriber's Orders (continued)**

the Controlled Substance Record which accounts for the missing pill for Resident [REDACTED] indicating the medication was given.

Upon review of dates and medication administration issues discussed with Medication Tech Supervisor scheduled on majority of these dates by Executive Director on 2/18/2024. Reviewed the expectation of medications being administered timely and documented appropriately. Written counseling with explanation that continued issues could result in further disciplinary action up to and including termination.

To enhance the currently compliant operations, on 2/18/2024 ED completed training with Medication Technicians on Regulation 187d and introduced new Controlled Substance audit tool and new color coding to assist them. On 02/19/2024 the Health & Wellness Specialist completed training on Regulation 187d with RSC and RSC completed training with ED and Medication technicians. Completion date of 02/23/2024.

To maintain ongoing compliance effective 02/09/2024 the Executive Director or designee will perform daily checks using a new Controlled Substance audit tool through 06/26/2024 to maintain ongoing compliance with ensuring, at a minimum, the procedures must include, including A process to investigate and account for missing medications and medication errors. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Follow up documentation: 1. Training Attendance Records

2. Training and Expectations with Med Tech Supervisor

3. MAR and Controlled Substance Record Resident [REDACTED]

4. Controlled Substance Audit Tool

Proposed Overall Completion Date: 03/26/2024

Licensee's Proposed Overall Completion Date: 03/26/2024

Implemented [REDACTED] - 05/06/2024)