

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

September 25, 2026

[REDACTED]
ARDEN COURTS SUSQUEHANNA OF HARRISBURG PA LLC
[REDACTED]
[REDACTED]

RE: ARDEN COURTS (SUSQUEHANNA)
2625 AILANTHUS LANE
HARRISBURG, PA, 17110
LICENSE/COC#: 32431

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/16/2026, 06/17/2026 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 (SUSQUEHANNA)

License #: 32431

License Expiration: 04/23/2026

Address: 2625 AILANTHUS LANE, HARRISBURG, PA 17110

County: DAUPHIN

Region: CENTRAL

Administrator

Name:

Phone:

Email:

Legal Entity

Name: ARDEN COURTS SUSQUEHANNA OF HARRISBURG PA LLC

Address:

Phone:

Email:

Certificate(s) of Occupancy

Type: C-2 LP

Date: 01/28/2000

Issued By: Department of Labor & Industry

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 124

Waking Staff: 93

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Complaint, Incident, Interim

Exit Conference Date: 06/17/2026

Inspection Dates and Department Representative

06/16/2026 - On-Site:

06/17/2026 - On-Site:

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 64

Residents Served: 62

Secured Dementia Care Unit

In Home: Yes

Area: Entire Home

Capacity: 64

Residents Served: 62

Hospice

Current Residents: 19

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 62

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 62

Have Physical Disability: 0

Inspections / Reviews

06/16/2026 Partial

Lead Inspector:

Follow-Up Type: POC Submission

Follow-Up Date: 07/19/2026

Inspections / Reviews (*continued*)

07/27/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/21/2026

Reviewer: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 08/03/2026

08/17/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/21/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 09/21/2026

09/25/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/21/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

17 - Record Confidentiality

1. Requirements

2600.

17. Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

Description of Violation

On [REDACTED] at 9:35am, the area where staff sits, in the Boat House kitchen, was unattended and the following items are unlocked, unattended, and accessible:

- A list of all residents labeled podiatry appointments – the list includes dates of birth for all residents as well as the type of podiatry care that is required including for Resident [REDACTED] Resident [REDACTED] and Resident [REDACTED] were in an unlocked, opened drawer over the kitchen counter.
- There was a plastic box with envelopes containing the face sheets for residents which include dates of birth, diagnosis information, allergies, type of diets, and vital statistics including blood pressure, heart rate, and oxygen saturation; including for Resident # [REDACTED] Resident [REDACTED], Resident [REDACTED], Resident [REDACTED], Resident [REDACTED] Resident [REDACTED] and Resident [REDACTED]

Plan of Correction

Accept [REDACTED] 07/27/2026)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 06/16/2026 by the Resident Services Coordinator to remove the podiatry appointment list and the emergency transfer box from the unlocked cabinet.

To enhance the currently compliant operations, on 7/22/2026 the Resident Services Coordinator will inservice all staff on HIPAA and the importance of making sure all resident information is kept secured in a locked area.

For a period of 2 months, starting 07/21/2026, rounds will be completed daily for confidential materials to ensure compliance with regulation 17 and HIPAA.

Licensee's Proposed Overall Completion Date: 09/21/2026

Implemented [REDACTED] 09/25/2026)

82c - Locking Poisonous Materials

2. Requirements

2600.

- 82.c. Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

Description of Violation

On [REDACTED] at 9:20am, the Garden Place staff station was unattended which contained a filing cabinet that was unlocked containing the following poisonous items:

- Four bottles of hand sanitizer with a manufacturer's label stating, "If swallowed, get medical help or contact a Poison Control Center right away."
- A spray bottle of Skintegrity wound cleanser the wound cleanser has a manufacturer's label which reads, Keep

82c Locking Poisonous Materials (continued)

out of reach of children. For external use only. If swallowed, get medical help or contact a poison control center immediately."

On [REDACTED], at 11:24am there was a bottle of Remedy anti fungal powder with a manufactures labeled stating, "if swallowed, get medical help or contact a poison control center right away, in bedroom 7 occupied by resident [REDACTED].

On [REDACTED] at 11:26am, a 1oz tube of triple antibiotic ointment with a manufacturer's label stating "If swallowed, get medical help or contact a Poison Control Center right away" was stored on the resident [REDACTED]'s bathroom vanity. "

On [REDACTED] At 11:53am, there are two 4 oz bottles of Sparklefresh Mouthwash with a manufacture's label that state, "In case of accidental ingestion, seek professional assistance or contact a Poison Control Center immediately" observed in bedroom [REDACTED] which is occupied by Resident [REDACTED]

On [REDACTED] at 11:40am there was a bottle of antifungal powder in Resident [REDACTED]'s bathroom vanity with a manufacture's label that state to contact a poison control center if swallowed.

On [REDACTED] at 12:10pm, the lockable cabinet below Resident [REDACTED] sink was unlocked and the following poisonous items were accessible with manufacturer's label stating the following:

- Tube of Remedy brand protect zinc oxide paste "if swallowed get medical help or contact a poison control center right away."
- Two bottles of antifungal powder "if swallowed get medical help or contact a poison control center right away".
- Sparklefresh Mouthwash "In case of accidental ingestion, seek professional assistance or contact a Poison Control Center immediately"

Plan of Correction**Accept [REDACTED] - 07/27/2026)**

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 6/6/2026 by the Building Services Coordinator and Resident Services Coordinator (DON) to remove items throughout walkthrough.

Environmental rounds were started the next day 6/17/2026, by the Building Services Coordinator, checking the rooms and common areas daily for poisonous materials.

For a period of 2 months, starting 07/21/2026, environmental rounds will be completed daily for poisonous materials to ensure nothing poisonous is in the resident rooms or kitchenettes by the Building Services Coordinator or designee.

All staff education occurred 6/23/2026, conducted by the Adminisitrative Services Coordinator, Executive Director, and Resident Services Coordinator to alert team members that poisonous materials may not be in a resident's room or common areas at any time.

Licensee's Proposed Overall Completion Date: 09/21/2026

Implemented [REDACTED] - 09/25/2026)**89b - Hot Water Temperature**

3. Requirements

2600.

89.b. Hot water temperature in areas accessible to the resident may not exceed 120°F.

Description of Violation

On [REDACTED] at 11:37am, the hot water temperature at the kitchen sink in Country Lane measured 134.6 degrees Fahrenheit.

Plan of Correction

Accept [REDACTED] 07/27/2026)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 6/16/2026 by the Maintenance Director to correct the hot water tank so that the temperature does not exceed 120°F.

To enhance the currently compliant operations, on 7/22/2026 the ED and/or Maintenance Director will in-service all staff on regulation 89b with a completion date of 7/29/2026.

Effective 7/21/2026 the BSC will perform temperature audits of common area and resident room sinks, through 9/21/2026 to maintain ongoing compliance with 89b. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 09/21/2026

Implemented [REDACTED] - 09/25/2026)

125a - Combustible Storage

4. Requirements

2600.

125.a. Combustible and flammable materials may not be located near heat sources or hot water heaters.

Description of Violation

On [REDACTED] at 9:30am there was a shower chair leaning against the gas hot water heater and a laundry basket filled with rubber mats and other items, a Christmas tree box with a Christmas tree in the box, and a Christmas tree skirt was stored in close proximity to the gas furnace.

Plan of Correction

Accept [REDACTED] 07/27/2026)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 6/17/2026 by the Building Services Coordinator to remove items in the storage rooms.

To enhance the currently compliant operations, on 6/18/2026 the Building Services Coordinator walked through all storage rooms and removed additional items that could pose a hazard.

For a period of 2 months, starting 07/21/2026, environmental rounds will be completed weekly for combustible and flammable materials located near heat sources or hot water heaters by the Building Services Coordinator.

Licensee's Proposed Overall Completion Date: 09/21/2026

Implemented [REDACTED] - 09/25/2026)

183b - Meds and Syringes Locked

7. Requirements

2600.

183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

Description of Violation

On [REDACTED] at 11:24am there was a bottle of Remedy anti-fungal powder that was unlocked, unattended, and accessible in bedroom [REDACTED] occupied by Resident [REDACTED]

On [REDACTED] at 11:26am, the following items were stored in a bathroom vanity, in bedroom [REDACTED] occupied by Resident [REDACTED], a 1 oz tube of triple antibiotic ointment manufacturer's label states "If swallowed, get medical help or contact a Poison Control Center right away."

Plan of Correction

Accept [REDACTED] - 07/27/2026)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 6/16/2026 by the Resident Services Coordinator to remove anti-fungal powder and triple antibiotic ointment in resident rooms.

All staff education occurred 6/23/2026, conducted by the Administrative Services Coordinator, Executive Director, and Resident Services Coordinator to alert team members that prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

For a period of 2 months, starting 07/21/2026, resident room rounds will be completed daily by the Resident Services Coordinator or designee to ensure no OTC meds are in resident rooms.

Licensee's Proposed Overall Completion Date: 09/21/2026

Implemented [REDACTED] - 09/25/2026)

187d - Follow Prescriber's Orders

9. Requirements

2600.

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

Description of Violation

Resident [REDACTED] is prescribed [REDACTED] tablet take 1 tablet by mouth daily for [REDACTED] and [REDACTED] plus tablet take 2 tablets by mouth daily for constipation. On [REDACTED] at 8:00am, the medication was not administered to the resident.

Resident [REDACTED] is prescribed to have their wheelchair to be leaned back three times per day every day at 7:00am, 3:00pm and 11:00pm. However, the physicians orders were not followed on [REDACTED] at 7:00am, [REDACTED] at 3:00pm and [REDACTED] at 3:00pm.

Resident [REDACTED] is prescribed [REDACTED], take 2 tablets by mouth (1000mg) three times a day. On [REDACTED]

187d Follow Prescriber's Orders (continued)

██████ and ██████ at 12:00pm, ██████ at 8:00am, and ██████ at 12:00pm the medications was not administered to the resident.

Resident ██████ is prescribed ██████ caplet, take 2 tablets by mouth (1000mg) three times a day at 8:00am, 12:00pm, and 5:00pm. The medication was administered outside of the time parameters on the following dates: ██████ at 10:08am, ██████ at 9:27pm, and ██████ at 10:49am.

Plan of Correction**Accept ██████ - 07/27/2026)**

In response to the violation on ██████ by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 6/17/2026 by the Resident Services Coordinator to conduct a MAR audit.

To enhance the currently compliant operations, on 7/22/2026 the Resident Services Coordinator will educate all nurses and med tech's on regulation 187d with a completion date of 7/29/2026.

Effective 7/21/2026 the Resident Services Coordinator or designee will perform MAR audits weekly for two months to maintain ongoing compliance with 187d. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 09/21/2026

Implemented ██████ - 09/25/2026)