



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

AUG 16 2013

Ms. Celeste Dashielle, Administrator/President
TEC Corp
P.O. Box 447
Point Pleasant, Pennsylvania 18950

RE: Family and Friends (Stone Ridge Building)
112 Cafferty Road
Pipersville, Pennsylvania 18947

Dear Ms. Dashielle:

As a result of the Department of Public Welfare's licensing inspection on June 13, 2013, of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Your regular license for the period of September 20, 2013 to September 20, 2014 was issued on June 17, 2013. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink, appearing to read "R. Melusky", written over a horizontal line.

Ronald Melusky
Director

Enclosure
Violation Report

Violation Report: 13633 - 06/13/2013 - Foulkes, Kimberl
 PCH Name: FAMILY AND FRIENDS STONE RIDGE BUILDING

1. REGULATION 55 Pa.Code §2600
 2600.185(a) - The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

2a. DESCRIPTION OF VIOLATION
 On 6/13/13 resident #1's medications Tylenol 500 mg and Muclnex DM 600-30 mg were not available in the home. These medications are prescribed for the resident to use as needed.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Resident's Tylenol (MAPAP) 500mg was ordered and received on 6/13/13. (see attached)
 Resident has not used PRN mucnex for prolonged period, so PRP discontinued order 6/14/13. (see attached)
 Policy + procedure for New Medication Order and policy + procedure for Medication Refill Order Request were reviewed by Administrator on 7/15/13. (see attached)
 Policy + procedures for New Medication Order and Medication Refill Order Request and related forms will be presented as retraining at monthly staff meeting scheduled for 7/16/13, including policy + procedure medication and medical equipment storage and security. (see attached training sheets)
 Administrator reviewed policy and procedure for Medication and Medical Equipment Storage and Security on 7/15/13.
 Medical Coordinator will monitor compliance on a monthly basis at quality management meeting. Weekend supervisor will monitor compliance on a bi-monthly basis.
 7/19/13 cm

Repeat Violation: Yes Date(s) of Previous Violation(s): 07/16/2012

Signature of Legal Entity Representative
 (Required on EVERY Page) *Celeste Dashiell*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Celeste DASHIELL ADM/DRES* Date *7-15-13*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 7/19/13
 (Date)

Plan of correction implementation status as of 7/19/13
 (Date)

The above plan of correction was approved by CM
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented