



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

JUN 21 2018

Ms. Elaine Sprainer  
Vice President  
ReMed Recovery Care Centers, LLC  
16 Industrial Boulevard, Suite 203  
Paoli, Pennsylvania 19301

RE: ReMed Recovery Care Center  
709 Fairview Road  
Fox Chapel, Pennsylvania 15238  
Certificate #: 446450

Dear Ms. Sprainer:

As a result of the Department's Bureau of Human Services Licensing annual inspection on November 16, 2017, of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

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

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Inspection](https://www.surveymonkey.com/r/BHSL_Inspection).

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Rowe', written over the printed name.

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary

**VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: REMED RECOVERY CARE CENTERS		License Number: 44645
Address: 709 FAIRVIEW ROAD, FOX CHAPEL, PA 15238		County: Allegheny
Administrator: Rebecca Rubish		Region: WEST
Legal Entity Name: REMED RECOVERY CARE CENTERS LLC		
Legal Entity Address: 16 INDUSTRIAL BLVD SUITE 203, PAOLI, PA 19301		
Certificate(s) of Occupancy R-4 10/20/2014 Borough of Fox Chapel		
Staffing Hours Resident Support: 0                      Total Daily Staff: 8                      Waking Staff: 6		
Type of Inspection: Full                      BHA Docket Number:                      Notice: Unannounced		
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 11/16/2017: McConnell, Deb		
Off-Site Inspection Dates and Inspectors, If Applicable		
Other Details Partial or Full Triggers:                      Random Indicators:		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 8 Number of Residents Served: 8 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 0 Number of Hospice Residents in past year: 0		Number of Residents who: Receive Supplemental Security Income: 2 Are 60 Years of Age or Older: 2 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 0 Have a Physical Disability: 0

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MAY 16 2018  
WEST REGION FIELD OFFICE  
Human Services Licensing

Violation Report: 44645 - 11/16/2017 - McConnell, Deb

PCH Name: REMED RECOVERY CARE CENTERS

**1. REGULATION 55 Pa.Code §2600**

2600.18 - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

**2a. DESCRIPTION OF VIOLATION**

The Influenza Awareness Act, enacted 11/21/16, requires influenza information to be posted in a public place in the facility year-round. There was no information posted in the home in accordance with The Influenza Awareness Act.

**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.*

On 11/16/17, an influenza awareness poster was posted on the client resource board (see attached photo) from the PA Department of Health. AS of 11/24/17 the posting was reviewed with all staff and residents. To ensure the poster remains posted year round, this has been added to the internal inspection checklist for compliance that the Site Manager completes on a monthly basis.

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MAY 16 2018

WEST REGION FIELD OFFICE  
Human Services Licensing

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

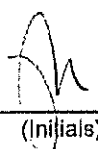
Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page)

Date

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

The above plan of correction is approved as of 5/16/18  
(Date)

Plan of correction implementation status as of 5/16/18  
(Date)

The above plan of correction was approved by   
(Initials)

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

Violation Report: 44645 - 11/16/2017 - McConnell, Deb  
 PCH Name: REMED RECOVERY CARE CENTERS

1. REGULATION 55 Pa.Code §2600  
 2600.103(d) - Food shall be stored off the floor.

2a. DESCRIPTION OF VIOLATION

Three, 5-gallon plastic jugs of water were stored on the floor in the furnace room and eighteen 5-gallon plastic jugs of water were stored on the floor in the garage.

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.*

11/17/17, the 3 bottles in the furnace have been put on a bottle buddy holder (see attached photo) and remaining bottle buddy holders are due to arrive from our water supply company on 12/11/17. To ensure we do not have excess bottles on the floor that exceed the bottle buddy capacity, the Site Manager has changed the monthly water order with the supplier. The Health and Safety Manager will check weekly for compliance and will confirm directly with the Site Manager.

RECEIVED  
 MAY 16 2018  
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Violation Report: 44645 - 11/16/2017 - McConnell, Deb  
 PCH Name: REMED RECOVERY CARE CENTERS

**1. REGULATION 55 Pa.Code §2600**

2600.227(d) - Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services.

**2a. DESCRIPTION OF VIOLATION**

The support plan for resident #1, dated 9/1/17, does not address how the home will meet the resident's needs related to supervision in and out of the home, irritability, judgment, agitation and aggression, as indicated in the assessment, dated 8/18/17.

The support plan for resident #2, dated 7/20/17, does not address how the home will meet the resident's needs related to blood glucose testing three times a week, daily cleaning of inhaler chamber, and weekly cleaning of C-PAP machine, orientation to time, place and person, irritability, judgment and agitation, as indicated in the resident's assessment, dated 7/20/17.

The support plan for resident #3, dated 10/3/17, does not address how the home will meet the resident's needs related to judgment and agitation, as indicated in the assessment, dated 9/20/17.

**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.*

The Clinical Specialist has started the process to adjust each of the three specified residents' support plans to detail the medical, mental health or behavioral care services that will be made available to meet the resident's identified needs. This will be completed by 12/13/17.

Over the next month, the Clinical Specialist will adjust the support plans of all of the residents in the program, to detail the medical, dental, vision, hearing, mental health or behavioral care services that will be made available to meet each of the residents' needs as identified on the plan.

Going forward, the RCM/Clinical Specialist will ensure that each resident's support plan includes detailed medical, dental, vision, hearing, mental health or behavioral care services that will be made available for each need identified on the plan.

Staff will continue to be educated regarding the care services they must provide to the residents via initial staff training, annual staff training, and written strategies.

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