



May 14, 2019

Ms. Elaine Lecatsas
Vice President of Operations
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. Lecatsas:

As a result of the Department's Bureau of Human Services Licensing annual inspection on November 13, 2018, of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations 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.

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.

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 that reads "J. Rowe". The signature is stylized and cursive.

Jacqueline L. Rowe
Director

Enclosure
Violation Report

Violation Report: 44645 - 11/13/2018 - Barone, Barbara
 PCH Name: REMED RECOVERY CARE CENTERS

1. REGULATION 55 Pa.Code §2600
 2600.132(a) - An unannounced fire drill shall be held at least once a month.

2a. DESCRIPTION OF VIOLATION

On 9/13/2018 staff person A was instructed by email that he/she was to conduct a fire drill over the weekend. The administrator and staff person B were copied on the email. On Saturday 9/15/18 at 6:26 pm staff person A conducted the fire drill while both he/she and staff person B were working.

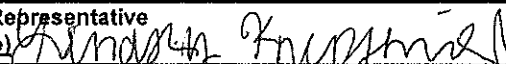
3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

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 Administrator reviewed the violation report with the health and safety representative and reviewed the definition of "unannounced" in accordance with the regulation. The administrator discussed the communication process to assure the procedure's compliance. Prior to each month's fire drill, the health and safety representative will select the staff person responsible to conduct the drill and the administrator will personally notify that staff. This procedure will allow for continuous education to all staff on drill procedures, as well as maintaining the drill to be unannounced for any other staff on that shift.

The process will be reviewed in the March staff meeting, as well as reviewing the procedure with all staff to complete an unannounced fire drill.


Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) 

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Lindsay Krepshield, Site Manager Date 2/28/19

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

The above plan of correction is approved as of 4/29/19
 (Date)

The above plan of correction was approved by 
 (Initials)

Plan of correction implementation status as of 4/29/19
 (Date)

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