



October 17, 2019

Ms. Celeste DaShiell  
Administrator  
TEC CORP  
P.O. Box 447  
Point Pleasant, Pennsylvania 18950

RE: Family and Friends Stone Ridge Building  
112 Cafferty Road  
Pipersville, Pennsylvania 18947  
License #: 136630

Dear Ms. DaShiell:

As a result of the Department's Bureau of Human Services Licensing annual inspection on February 27, 2019 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 (relating to Personal Care Homes) 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 "Kevin Hancock", written over a white background.

Kevin Hancock  
Deputy Secretary  
Office of Long-term Living

Enclosure  
Violation Report



Violation Report: 136336 02/27/2019 - Gray, Dean  
 PCH Name: FAMILY AND FRIENDS STONE RIDGE BUILDING

1. REGULATION 65 Pa.Code §2800  
 2800.132(f) - Alternate exit routes shall be used during fire drills.

2a. DESCRIPTION OF VIOLATION

The frontback exits were used during the fire drill on 12/30/18, 01/13/19 and 02/02/19.

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.

See attached POC

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page)	<i>Celeste Dashnell</i>	ADA
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Celeste Dashnell / Administrator	Date	9-16-19
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of 9/17/19  
 (Date)

The above plan of correction was approved by *MD*  
 (Initials)

Plan of correction implementation status as of 9/17/19  
 (Date)

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

Family & Friends Stone Ridge Building License # 136330

Due to the nature of the violation it is not possible to correct previous fire drill execution. The focus of the plan of correction will outline the steps taken and ongoing measures to prevent reoccurrence of the violation cited for 2600.132(f).

On February 27<sup>th</sup>, 2019, during the inspection Family & Friends Administrator [REDACTED] reviewed the rules and regulations, RCG and part 2 of the RCG relating to 2600.132(f) to confirm the specifics identifying the expectation of the Department for frequency of altering exits used. Administrator did not locate any specifics in any those locations.

Although Family & Friends planned to request reconsideration of the violation based on the absence of clear and identifiable regulation or guidelines issued by the Department of Human Services Family & Friends proceeded to implement an internal plan of correction addressed at communication and monitoring to address the anticipated citation. Family & Friends recognizes that it is beneficial to ensure to all to improve in life safety areas, but would appreciate clarity of expectations prior to violations being issued.

Following is an outline of the internal plan of correction and attachments;

On March 4<sup>th</sup>, 2019, [REDACTED] Program Coordinator communicated via email to [REDACTED] Fire Marshall and conductor of Family & Friends drills, clarification regarding the Departments expectations alternating exits during fire drills and the need to ensure that the exit(s) used are not the same for more than 2 months consecutively. (see attached email)

Program Coordinator monitored the monthly drill log to ensure that exits utilized during drills did not utilize the same exit routes for more than 2 months consecutively. (See attached drill log and corresponding drill sheets) -- March 2019 ongoing


On March 19<sup>th</sup>, 2019, Administrator/ [REDACTED] requested the Departments reconsideration of the anticipated citation for using the same exits for 3 months consecutively. (see attached letter).

After receipt of the violation report on September 10<sup>th</sup>, 2019, a formal letter was drafted and sent to [REDACTED] outlining the need to alter exit use during monthly fire drills with specifics as well as communicating that the Program Coordinator will monitor the exits used by reviewing the monthly drill sheet and log. Program Coordinator will communicate with the conductor of the fire drills the need to alter the next exit routes utilized in the event that the same exit routes were utilized for 2 consecutive months.

September 11<sup>th</sup>, 2019, Program Coordinator developed and initiated Monthly Fire drill QA Monitoring form focusing on areas of drills that need to alternate specifically including exit routes utilized. (see attached form)

  
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Celeste DaShiell/ Administrator

9-16-19  
Date

 9/17/19