



December 11, 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 Centers  
2 Harvey Lane  
Malvern, Pennsylvania 19335  
License #: 128470

Dear Ms. Lecatsas:

As a result of the Department's Bureau of Human Services Licensing annual inspection on August 8, 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 in a cursive style.

Kevin Hancock  
Deputy Secretary  
Office of Long-term Living

Enclosure  
Violation Report

## Violation Report

### Facility Information

Name: *REMED RECOVERY CARE CENTERS* License Number: *12847*  
 Address: *2 HARVEY LANE,, MALVERN, PA 19335*  
 County: *CHESTER* Region: *SOUTHEAST*

### Administrator

Name: *Diane Amicone* Phone: *4845959300* Email: *damicone@remed.com*

### Legal Entity

Name: *REMED RECOVERY CARE CENTERS*  
 Address: *16 INDUSTRIAL BLVD, SUITE 203, PAOLI, PA, 19301*

### Certificate(s) of Occupancy

Type: *R-4* Date: *04/02/2008* Issued By: *Willistown Township, Chester County, PA*

### Staffing Hours

Resident Support Staff: *36* Total Daily Staff: *52* Waking Staff: *39*

### Inspection

Type: *Full* BHA Docket #: Notice: *Unannounced*  
 Reason: *Renewal*

### Inspection Dates and Department Representative

*08/08/2019 - On-Site: Dean Gray*

### Resident Demographic Data as of Inspection Dates

#### General Information

License Capacity: *8* Residents Served: *8*

#### Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

#### Hospice

Current Residents: *0*

#### Number of Residents Who:

Receive Supplemental Security Income: *3* Are 60 Years of Age or Older: *3*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *8* Have Physical Disability: *4*

REMED RECOVERY CARE CENTERS

12847

18 - Compliance With Laws

Regulations

2600.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

Per 34 Pa. Code Chapter 3, known as the Boilers and Unfired Pressure Vessels regulations. (governed by Department of Labor and Industry). If a home has a boiler, it must have a valid "Certificate of Boiler or Pressure Vessel Operation" issued by the PA Department of Labor and Industry. Upon expiration of the certificate, boilers must be inspected, and if they pass inspection they will be issued a new certificate. The last inspection of the boiler was conducted on 06/29/17 and expired 6/6/19.

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.)

Department of Labor and Industry contacted. Inspection was completed on 8/28/19. Please see attached certificate.

The administrator will obtain an updated inspection certificate to indicate the expiration date for the inspection conducted on 8/28/19, by November 30, 2019. The administrator will maintain a copy of the updated certificate for the Departments review. (slw 10/30/19)

Legal Entity Representative

*Diane Amicone*

Signature

DIANE AMICONE, PROGRAM DIRECTOR 9/17/19

Printed Name and Title

Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 10/30/19  
(Date)

Plan of correction implementation status as of 10/30/19  
(Date)

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

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

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REMED RECOVERY CARE CENTERS

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25b SOPb1 - Rent Rebate: Amount Collected

Regulations

2600.

25b.b.1. If the home collects a resident's rent rebate under subsection (a), the resident-home contract is to include the following: The dollar amount or percentage of the rent rebate to be collected.

Description of Violation

The resident-home contract, dated 05/13/19, for Resident #1 does not indicate the amount or percentage the home will collect of the resident's rent rebate benefit.

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 original resident home contract that was completed with admissions coordinator was inaccurate. The contract has been amended with the correct information.

Please see attached copy of home contract.

The administrator or designee will conduct an audit of all resident contracts to ensure the required narrative related to rent rebates is correct in all contracts, starting November 30, 2019 and annually thereafter.

(slw 10/30/19)

Legal Entity Representative

*Diane Amicone*

DIANE AMICONE, PROGRAM DIRECTOR 9/17/19

Signature

Printed Name and Title

Date

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REMED RECOVERY CARE CENTERS

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25b SOPb2 - Rent Rebate: Intended Use

Regulations

2600.

25b.b.2. If the home collects a resident's rent rebate under subsection (a), the resident-home contract is to include the following: The home's intended use of the revenue collected from the rent rebate.

Description of Violation

The resident-home contract, dated 05/13/19, for resident #1 states that the home will collect a portion of the rent rebate benefit for eligible residents. Resident #1 is an eligible resident. The contract does not include the home's intended use for rent rebate revenues collected.

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 original resident home contract that was completed with admissions coordinator was inaccurate. The contract has been amended with the correct information.

Please see attached copy of home contract.

The administrator or designee will conduct an audit of all resident contracts to ensure the required narrative related to rent rebates is correct in all contracts, starting November 30, 2019 and annually thereafter.

(slw 10/30/19)

Legal Entity Representative

*Diane Amicone*

DIANE AMICONE, PROGRAM DIRECTOR 9/17/19

Signature

Printed Name and Title

Date

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REMED RECOVERY CARE CENTERS

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89b - Hot Water Temperature

Regulations

2600.

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

Description of Violation

On 08/08/19, the hot water temperature at bathroom #3 measured 124.1 degrees Fahrenheit.

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 temperature on the hot water heater was adjusted by the maintenance department. This will be checked regularly by Health & Safety Representative as a part of their walk-thru. Please see attached picture of current water temperature reading.

The administrator will review the hot water temperature readings with the Health and Safety Representative at least weekly, starting immediately. (slw 10/30/19)

Legal Entity Representative

	DIANE AMICONE, PROGRAM DIRECTOR	9/17/19
Signature	Printed Name and Title	Date

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REMED RECOVERY CARE CENTERS

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101j7 - Lighting/Operable Lamp

Regulations

2600.

101.j. Each resident shall have the following in the bedroom:

- 7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

Resident #2 does not have access to a source of light that can be turned on/off at bedside.

Repeat Violation: 08/29/18.

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.)

Light source was mounted to bedroom wall besides client bed.

Please see attached photo.

Housekeeping and direct care staff will be educated on the importance of a light being available at bedside and how to check that the lights are operable when they make the beds or check the rooms by November 30, 2019. (slw 10/30/19)

Legal Entity Representative

*Diane Amicone*

DIANE AMICONE, PROGRAM DIRECTOR 9/17/19

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REMED RECOVERY CARE CENTERS

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103f - Refrigerator/Freezer Temps

Regulations

2600.

103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

Description of Violation

There was no thermometer in the freezer in the laundry room's Whirlpool refrigerator/freezer.

There was no thermometer in the refrigerator in the kitchen's Frigidaire refrigerator/freezer.

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.)

Thermometers were installed in both the laundry room freezer and kitchen refrigerator. These will be monitored weekly as a part of the Food Service Manager's checklist.

Please see attached photos.

The administrator will conduct a walk-thru at least monthly to ensure the thermometers are present in all refrigerators and freezers, starting immediately. (slw 10/30/19)

Legal Entity Representative

*Diane Amicone*

Signature

DIANE AMICONE, PROGRAM DIRECTOR 9/17/19

Printed Name and Title

Date

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REMED RECOVERY CARE CENTERS

12847

132f - Alternate Exit Routes

Regulations

2600.

132.f. Alternate exit routes shall be used during fire drills.

Description of Violation

The front door exit was used during every fire drill conducted by the home from August 2018 to July 2019. The fire drill conducted on 10/25/18, by the fire safety expert, was the only drill that did not use the front door as an exit.

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.)

Fire Drill process and importance of alternating exit routes reviewed with Health & Safety Representative, as well as all staff. The fire drill that was conducted on 8/10/19 utilized an alternate exit route (rear patio exit). The Health & Safety Representative will monitor this closely and follow procedure of using alternate exits. Site Manager will also review monthly when signing off on completed drills. Please see attached copy of drill completed on 8/10/19.

The administrator will conduct an in-service on the importance of using alternative exits during an emergency or fire drill to all staff and residents by November 30, 2019. (slw 10/30/19)

Legal Entity Representative

Diwane Amicone DIANE AMICONE, PROGRAM DIRECTOR 9/17/19
Signature Printed Name and Title Date

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