

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC

October 19, 2023

[REDACTED]
REMED RECOVERY CARE CENTERS LLC
[REDACTED]

RE: REMED RECOVERY CARE CENTERS
1152 NORTH NEW STREET
WEST CHESTER, PA, 19380
LICENSE/COC#: 10623

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/16/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: *REMED RECOVERY CARE CENTERS* License #: 10623 License Expiration: 05/26/2024
Address: 1152 NORTH NEW STREET, WEST CHESTER, PA 19380
County: CHESTER Region: SOUTHEAST

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: *REMED RECOVERY CARE CENTERS LLC*
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: Total Daily Staff: 10 Waking Staff: 8

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Monitoring* Exit Conference Date: 06/16/2023

Inspection Dates and Department Representative

06/16/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 8 Residents Served: 7

Secured Dementia Care Unit

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

Hospice

Current Residents: *x*

Number of Residents Who:

Receive Supplemental Security Income: 2 Are 60 Years of Age or Older: 2
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 3 Have Physical Disability: 6

Inspections / Reviews

06/16/2023 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: 07/07/2023

07/28/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: 09/20/2023
Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: 08/02/2023

Inspections / Reviews *(continued)*

09/07/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/20/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 09/22/2023

10/19/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/20/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

183d - Prescription Current

1. Requirements

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

On 06/16/2023, [redacted] prescribed for resident #1 was in the home's medication cart. The blister pack was not used and contained 3 pills. The label read [redacted]. The order changed to [redacted] on 05/30/2023. According to staff A, the pharmacy does not give the home direction change stickers and the blister pack should have been sent to the main office to be destroyed. [redacted] for the same resident was discontinued on 05/31/2023 but was present on the medication cart on 6/16/23.

Plan of Correction

Accept [redacted] - 09/07/2023)

As of 7/5/23 a new medication cart/closet audit process was created by the home's Clinical Specialist. On a weekly basis, the home's medication manager (or the Clinical Specialist as a back up person if needed) will print each resident's MAR and audit all standing and PRN medications to ensure that there is an adequate supply within the program and that any medications are reordered in a timely manner if needed. The medication manager is also responsible for auditing recently discontinued medications to ensure that the supply is removed and properly disposed of once a medication is discontinued or expired. A tracker was created to document that all standing and PRN medications are available, as well as to document that discontinued or altered orders have been removed from the medication closet. See attached audit tracker.

Update: The discontinued medication ([redacted]) was removed from the home on 6/13/23, by the Clinical Specialist, and was taken to be appropriately discarded at our main office where discontinued medications are stored until picked up by a contracted medication disposal company. The medication with the correct/up to date label ([redacted]) was ordered and delivered on 6/16/23. The [redacted] was also removed from the medication cart on 6/16/23 by the Clinical Specialist.

Licensee's Proposed Overall Completion Date: 08/01/2023

Implemented [redacted] 10/19/2023)

185a - Implement Storage Procedures

2. Requirements

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.

Description of Violation

Resident #1 is prescribed [redacted] Resident #2 is prescribed [redacted] On 06/16/2023, these medications were not available in the home.

Plan of Correction

Accept [redacted] - 09/07/2023)

As of 7/5/23 a new medication cart/closet audit process was created by the home's Clinical Specialist. On a weekly basis, the home's medication manager (or the Clinical Specialist as a back up person if needed) will print each resident's MAR and audit all standing and PRN medications to ensure that there is an adequate supply within the

185a - Implement Storage Procedures (continued)

program and that any medications are reordered in a timely manner if needed. A tracker was created to document that all standing and PRN medications are available, as well as to document that discontinued or altered orders have been removed from the medication closet. Auditing all PRN medications on a weekly basis will ensure all prescribed medications are always available in the home. See previously attached audit tracker.

Update: Resident #1's [redacted] were both ordered by the Clinical Specialist on 6/16/23 and are now in stock in the home.

Resident #2's [redacted] were all reordered on 6/16/23 by the Clinical Specialist and are now in stock in the home.

Licensee's Proposed Overall Completion Date: 08/01/2023

Implemented [redacted] - 10/19/2023)

187a - Medication Record

3. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

Description of Violation

Resident #1 is prescribed [redacted] However, the resident's June medication administration record (MAR) does not include a diagnosis or purpose for this medication.

Resident #2 is prescribed [redacted] However, the resident's June medication administration record (MAR) does not include a diagnosis or purpose of these medications.

Plan of Correction

Accept [redacted] - 09/07/2023)

A meeting occurred with all individuals who could be responsible for approving medications in QuickMAR, including the home's Clinical Specialist, Case Manager's/RN's, and LPN's, to review that all orders being approved in QuickMAR need to have a diagnosis attached to the order prior to approval.

This was also reviewed with the entire team during weekly rounds on 7/5/23. If a team member notices an order without a diagnosis, they are to alert one of the above mentioned team members so that this can be rectified as soon as possible.

Update: Resident #1's [redacted] and Resident #2's [redacted] have had diagnoses updated in QuickMar, completed on 6/16/23 by the Clinical Specialist. Upon arrival from the pharmacy, all new orders are to be checked for label accuracy (Medication, Dosage and Frequency), as well as the diagnosis and start/end dates prior to approval by either the Clinical Specialist or a Nurse. The Clinical Specialist reviews renewed orders on a weekly basis to ensure that all pertinent information has been imported into the renewed order. This started on 7/5/23, after reviewing with the team during weekly rounds, and will continue for a minimum of 6 months to ensure the new system is effective.

Licensee's Proposed Overall Completion Date: 08/01/2023

Implemented [redacted] - 10/19/2023)

187d - Follow Prescriber's Orders

4. Requirements

187d - Follow Prescriber's Orders (continued)

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #2 is prescribed [REDACTED] However, this medication was not administered to resident #2 at 07:00 AM on 06/16/2023 because the medication was not available in the home.

Plan of Correction

Accept [REDACTED] - 09/07/2023)

As of 7/5/23 a new medication cart/closet audit process was created by the home's Clinical Specialist. On a weekly basis, the home's medication manager (or the Clinical Specialist as a back up person if needed) will print each resident's MAR and audit all standing and PRN medications to ensure that there is an adequate supply within the program and that any medications are reordered in a timely manner if needed. A tracker was created to document that all standing and PRN medications are available, as well as to document that discontinued or altered orders have been removed from the medication closet. During the audit, the medication manager is to reorder any medications with a 10 day supply or less through QuickMAR and document reordered/refilled medications on the Medication Ordering sheet. When reordering is completed, the medication manager is to print out the Reorders Sent sheet from QuickMAR and email both of these sheets to the Clinical Specialist and Case Managers/RN's to communicate which medications were reordered and when, as well as the supply left. Either the Clinical Specialist or Case Managers/RN's will follow up with the pharmacy within 3 days to ensure that refills will arrive on time and/or check if any additional documentation needs to be completed prior to the medication supply running out.

Update: Resident #2's prescribed [REDACTED] was delivered to the home at approximately 12:45pm on 6/16/23, as the Clinical Specialist had already been working with the pharmacy to ensure it was made available. Prescriber was consulted regarding administration times and permission was given to administer 7am dose upon arrival. Dose was administered at 1pm.

Licensee's Proposed Overall Completion Date: 08/01/2023

Implemented [REDACTED] - 10/19/2023)