

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

November 17, 2025

[REDACTED]  
TEC CORP  
[REDACTED]

RE: FAMILY AND FRIENDS (STONE  
RIDGE BUILDING)  
112 CAFFERTY ROAD  
PIPERSVILLE, PA, 18947  
LICENSE/COC#: 13633

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/16/2025 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: FAMILY AND FRIENDS (STONE RIDGE BUILDING) License #: 13633 License Expiration: 09/20/2026  
 Address: 112 CAFFERTY ROAD, PIPERSVILLE, PA 18947  
 County: BUCKS Region: SOUTHEAST

**Administrator**

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

**Legal Entity**

Name: TEC CORP  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: I-1 Date: 10/13/2010 Issued By: Tinicum Township

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 18 Waking Staff: 14

**Inspection Information**

Type: Full Notice: Unannounced BHA Docket #:  
 Reason: Renewal Exit Conference Date: 10/16/2025

**Inspection Dates and Department Representative**

10/16/2025 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 28 Residents Served: 16  
 Secured Dementia Care Unit  
 In Home: No Area: Capacity: Residents Served:  
 Hospice  
 Current Residents: 1  
 Number of Residents Who:  
 Receive Supplemental Security Income: 7 Are 60 Years of Age or Older: 15  
 Diagnosed with Mental Illness: 14 Diagnosed with Intellectual Disability: 1  
 Have Mobility Need: 2 Have Physical Disability: 0

**Inspections / Reviews**

10/16/2025 Full  
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 11/08/2025

11/17/2025 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: 11/17/2025  
 Reviewer: [REDACTED] Follow-Up Type: Bypass Document Submission

Inspections / Reviews *(continued)*

11/17/2025 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/17/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

51 - Criminal Background Check

1. Requirements

2600.

51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

Direct care staff member A, who's first day in the home was [REDACTED], did not have a criminal background check completed until [REDACTED]

Plan of Correction

Accept [REDACTED] - 11/17/2025)

Employee orientation/training on Friday, 10/4/25 which was conducted out of resident's building with policy review and training and video watching. OJT scheduled to start 10/6/25. QA Coordinator failed to complete the required criminal check prior to or on employee A's 1st shift of on the job training. Upon review of the Pre-employment/ new hire check list by the Program Coordinator on 10/30/25 it was noted that it had inaccurate time requirements indicating that it be within 5-days of hire. The pre-employment/ new hire checklist was updated by the QA Coordinator on 10/31/25 to reflect that the criminal check and if needed FBI clearances will be completed on or before hire (see attached checklist). P&P for " Request and verification of Criminal History Clearance" was reviewed & revised by the QA Coordinator on 11/5/25 (see attached). Both the Program Coordinator and QA Coordinator were trained in the updated policy and checklist by the Administrator on 11/5/25 (see attached). Documentation of the training has been filed in staff files by QA Coordinator on 11/6/25.

Licensee's Proposed Overall Completion Date: 11/07/2025

Implemented [REDACTED] - 11/17/2025)

96a - First Aid Kit

2. Requirements

2600.

96.a. The home shall have a first aid kit that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers.

Description of Violation

On [REDACTED] the first aid kit in the home's medication closet did not include antiseptic.

Plan of Correction

Accept [REDACTED] - 11/17/2025)

Antiseptic wipes were purchased on 10/16/25 by the Program Coordinator. After receipt of the antiseptic wipes the wipes were placed in all of the first aid kits by the Health & Wellness Assistant completed on 10/24/25 (see attached). Program Coordinator reviewed the monthly first aid QA checklist and found that both antiseptic and first aid cream shared the same checklist allowing for the assumption that it was one or the other. First aid QA checklist was updated by Program Coordinator on 11/5/25 to separate antiseptic and first aid cream to ensure both items are checked individually and in place (see attached). Health & Wellness Assistant, responsible for the monthly first aid QA was trained in the revised QA checklist by the Program Coordinator on 11/7/25 (see attached). Ongoing the revised QA first aid checklist will be utilized by the Health & Wellness Assistant to ensure required items are available in the first aid kits (ongoing). Global training for all staff regarding first aid kits inclusive of required contents will occur at the next staff meeting/ training (by 11/21/25) training will be provided by QA Coordinator.

Licensee's Proposed Overall Completion Date: 11/21/2025

Implemented [REDACTED] - 11/17/2025)