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

August 12, 2026

[redacted], QUALITY MANAGEMENT AND PHYSICIAN SUPPORT SPECIALIST
REMED RECOVERY CARE CENTERS
[redacted]

RE: REMED
137 SPRUCE LANE
PAOLI, PA, 19301
LICENSE/COC#: 13833

Dear [redacted]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/18/2026 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* **License #**: *13833* **License Expiration**: *09/19/2026*

Address: *137 SPRUCE LANE, PAOLI, PA 19301*

County: *CHESTER* **Region**: *SOUTHEAST*

Administrator

Name: [redacted] **Phone**: [redacted] **Email**: [redacted]

Legal Entity

Name: *REMED RECOVERY CARE CENTERS*

Address: [redacted]

Phone: [redacted] **Email**: [redacted]

Certificate(s) of Occupancy

Type: *R-3* **Date**: *05/29/2011* **Issued By**: *Willistown Township*

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff**: *5* **Waking Staff**: *4*

Inspection Information

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

Reason: *Renewal* **Exit Conference Date**: *06/18/2026*

Inspection Dates and Department Representative

06/18/2026 - On-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *5* **Residents Served**: *5*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *5* **Are 60 Years of Age or Older**: *4*

Diagnosed with Mental Illness: *0* **Diagnosed with Intellectual Disability**: *0*

Have Mobility Need: *0* **Have Physical Disability**: *0*

Inspections / Reviews

06/18/2026 Full

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *07/20/2026*

07/21/2026 - POC Submission

Submitted By: [redacted] **Date Submitted**: *08/06/2026*

Reviewer: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *07/26/2026*

Inspections / Reviews *(continued)*

07/23/2026 POC Submission

Submitted By: [redacted] **Date Submitted:** *08/06/2026*

Reviewer: [redacted] **Follow Up Type:** *Document Submission* **Follow Up Date:** *08/09/2026*

08/12/2026 Document Submission

Submitted By: [redacted] **Date Submitted:** *08/06/2026*

Reviewer: [redacted] **Follow Up Type:** *Not Required*

65f - Training Topics

1. Requirements

2600.
65.f. Training topics for the annual training for direct care staff persons shall include the following:
1. Medication self-administration training.
2. Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
4. Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.

Description of Violation

Direct care staff person A did not receive training in instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan, infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration during training year 1/1/2025 to 12/31/2025.

Plan of Correction ***Accept ([redacted] - 07/23/2026)***

The home has an annual training curriculum and procedures in place so that all staff complete the required annual training topics. Attached is the PA DHS Annual Trng Outline 2025, identifying these topics as a required annual training. Also attached is the 2026 version.

A training related to instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan will be completed by 8/31/26. The training will be completed by the Clinical Specialist and Case Manager. Documentation of training will be kept, and will be included added to staff Relias LMS transcripts.
The Administrator will schedule the training and email all staff, informing them of the training, its purpose and their requirement of attendance, by 7/31/26.

The Administrator will be responsible for scheduling this annual training going forward. Additional training will occur as needed based upon changes in resident status.

Updated: The training will be held by 8/7/26.

Licensee's Proposed Overall Completion Date: *08/07/2026*

Implemented ([redacted] - 08/12/2026)

65g - Annual Training Content

2. Requirements

2600.
65.g. Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:
3. Resident rights.

Description of Violation

Staff person A did not receive training in resident rights during training year 1/12025 to 12/31/2025.

Plan of Correction ***Accept ([redacted] - 07/21/2026)***

The home has an annual training curriculum and procedures in place so that all staff complete the required annual

65g Annual Training Content (continued)

training content. The PA DHS Annual Trng Outline 2025 lists the required trainings and modules for each staff to complete annually. This additionally highlights the required training content that are covered in each of the training or modules. Please see the previously attached PA DHS Annual Trng Outline 2025 and the previously attached 2026 version.

Procedure wise, the company's Training Coordinator registers all staff into all of the required trainings/modules when they are made available in the Relias LMS. They also email everyone at that time informing them that they are enrolled, the due date, and how to check their completion status in Relias. Staff also get emails 90 days, 60 days, 30 days, 1 week and then daily prior to a training's due date and overdue trainings. This report can also be manually checked with the current status at any time. The Training Coordinator also emails managers 2 weeks and 1 week prior to trainings with which of their staff are assigned to attend upcoming trainings.

Per the 2025 annual training curriculum, the training content of residents rights would have been covered in the following module: Collage Confidentiality & Compliance Overview. Staff A did not complete the Collage Confidentiality & Compliance Overview by the 12/31/25 due date. This training has since been completed on 2/11/26. See attached transcript.

The Administrator will meet with, and acquire written documentation from staff person A acknowledging understanding of completing required annual trainings on time, by 7/31/26.

The Administrator will run an audit monthly, beginning in July 2026, through Relias, and directly reach out to staff who have yet to complete required trainings, to provide a reminder and the due date. If necessary, throughout the 4th quarter of the year, staff will be given indirect time to complete their annual required trainings to complete all annual training content on time.

Licensee's Proposed Overall Completion Date: *07/31/2026*

Implemented ([redacted] - 08/12/2026)

101j7 - Lighting/Operable Lamp

3. Requirements

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

Plan of Correction ***Accept ([redacted] - 07/21/2026)***

On 6/18/26, the day of inspection, the violation was corrected. See attached photo of bedside tap light.

Beginning the week of 7/20/26, a DHS Bedroom Checklist will be implemented to be completed weekly, to ensure the presence of a working bedside lamp. The home's Lead Life Skills Trainer or a designee will be responsible for completion of this weekly checklist. This checklist will be in place for the duration of one year from the implementation date.

The Administrator will review the checklist weekly to ensure it is being completed.

101j7 Lighting/Operable Lamp *(continued)*

Licensee's Proposed Overall Completion Date: *07/26/2026*

Implemented ([redacted] - 08/12/2026)

103i - Outdated Food

4. Requirements

2600.
103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation

There was an unlabeled, undated container of Daisy light sour cream and Sesame teriyaki sauce in the refrigerator.

Repeat Violation: 7/1/2025

Plan of Correction ***Accept ([redacted] - 07/21/2026)***

On 6/18/26, the day of inspection, the above food items were removed from the refrigerator and thrown away.

On 7/17/26 the Administrator emailed all staff reviewing expectations surrounding proper handling of food items. See attached email. Staff have also been instructed to sign off acknowledging understanding of these expectations. See attached posting/sign off.

A DHS Kitchen Checklist will be implemented on 7/21/26, to be completed daily, to ensure all food items are stored and labeled properly. This checklist will be assigned to be completed on the daily staffing grids.

The Administrator will review the checklist weekly to ensure it is being completed.

Licensee's Proposed Overall Completion Date: *07/26/2026*

Implemented ([redacted] - 08/12/2026)

132g - Fire Drills Days/Times

5. Requirements

2600.
132.g. Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

Description of Violation

The home routinely holds fire drills at the end of the month as evidenced by the following drills 5/24/2025 at 10:00 am, 7/24/2025 at 6:30p, 8/21/2025 at 8:40 am, 9/20/2025 at 6:10 pm, 10/23/2025 at 4:10 am, 11/22/2025 at 10:00 am, 1/23/2026 at 8:15 am, 2/20/2026 at 7:30 pm, 3/28/2026 at 10:30 am, 4/22/2026 at 2:10 am and 5/23/2026 at 6:30 pm.

Plan of Correction ***Accept ([redacted] - 07/21/2026)***

On 7/17/26 the Administrator emailed all staff reviewing expectations surrounding varying days of fire drill completion. See attached email. Staff have also been instructed to sign off acknowledging understanding of these expectations. See attached posting/sign off.

132g Fire Drills Days/Times (continued)

The home's Scheduler will ensure that fire drills are completed on differing days throughout the month. The Administrator will review completed fire drill forms monthly, to ensure that fire drills are completed at varying times of the month.

Licensee's Proposed Overall Completion Date: *07/26/2026*

Implemented ([redacted] - 08/12/2026)

190c - Record of Training

6. Requirements

2600.
190.c. A record of the training shall be kept including the staff person trained, the date, source, name of trainer and documentation that the course was successfully completed.

Description of Violation

The home's medication administration training record for staff person B does not include the staff person's signed signature.

Plan of Correction ***Accept ([redacted] - 07/23/2026)***

Effective 7/20/26, the Training Coordinator directed all DHS Medication Trained Observers via email to have staff sign their annual medication administration training record immediately upon completion of their final observation.
Once all medication training records are completed and submitted to the Training Department, the Training Coordinator will review all forms to ensure all necessary signatures are present.

Updated: Staff person B will sign their medication administration training record during their next scheduled shift, Saturday 7/25/26. The Administrator has asked staff person B to email the signed copy to them upon completion, to confirm it has been signed.

Licensee's Proposed Overall Completion Date: *07/25/2026*

Implemented ([redacted] - 08/12/2026)