



pennsylvania
DEPARTMENT OF HUMAN SERVICES

APR 12 2019

Mr. Kevin McCollum
Its Manager
GAHC3 PALMYRA PA ALF TRS SUB LLC
18191 Von Karman Avenue, Suite 300
Irvine, California 92612

RE: Traditions of Hershey
100 North Larkspur Road
Palmyra, Pennsylvania 17078
Certificate #:332600

Dear Mr. McCollum:

As a result of the Department's Bureau of Human Services Licensing annual inspection on January 9, 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 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.

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 'J. Rowe'.

Jacqueline L. Rowe
Director

Enclosure
Violation Report

Violation Report: 33260 - 01/09/2019 - Hoover, Douglas
 PCH Name: TRADITIONS OF HERSHEY

1. REGULATION 55 Pa.Code §2600
 2600.65(g) - Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:

- (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert.
- (2) Emergency preparedness procedures and recognition and response to crises and emergency situations.
- (3) Resident rights.
- (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101-10225.5102).
- (5) Falls and accident prevention.
- (6) New population groups that are being served at the home that were not previously served, if applicable.

2a. DESCRIPTION OF VIOLATION
 Direct Care Staff Members A and B did not receive training in fire safety by a fire safety expert or a staff person trained by a fire safety expert in 2018.

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.

What: All direct care staff will be trained by a fire safety expert annually.

Who: A fire expert will train direct care staff on fire safety and evacuation specific procedures relevant of Traditions of Hershey using **Plan of Correction Training Direct Care Staff Members not Received Training in Fire Safety by Fire Safety Expert (Attachment A)**. Fire safety expert will train the direct care staff on **Traditions of Hershey Fire Safety Training Document (Attachment B)** and all new hires will be trained on first day of orientation. Traditions of Hershey will track all new hires with the **Training Tracker Document (Attachment C)** to ensure all new hires are adequately trained by a fire expert, verified with **Fire alarm/drill/safety procedure sign-in sheet (Attachment D)** of attendance at training.
 When: All direct care staff will be trained by 2/26/19.

How: All new hires will receive training on first day of orientation. Existing direct care staff will be trained annually.

Ongoing: The Executive Director or Designee will conduct monthly Quality Assurance audits to ensure all team members are compliant will annual fire safety training.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Sarah K. McEnnell, Administrator*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Sarah K. McEnnell, Administrator</i>	Date <i>2/8/19</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>3/22/19</u> (Date)	Plan of correction implementation status as of <u>3/22/19</u> (Date)
The above plan of correction was approved by <u>GE</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Plan of Correction Training

Direct Care Staff Members not Received Training in Fire Safety by Fire Safety Expert

(Attachment A)

2600.65(g) - Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas: (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert.

Discussion: All direct care staff going to be trained by a fire safety expert annually.

Primary Benefit: Ensures that all staff who work in the home are reminded of the home's emergency procedures and mandated reporting requirements.

Action Plan: Two team members trained but not by a fire expert. Fire expert training scheduled for 2/12/19 and all staff to be fire safety trained by 2/26/19 by fire expert.


Sarah K. McConnell, Administrator

2/8/19

Violation Report: 33260 - 01/09/2019 - Hoover, Douglas
 PCH Name: TRADITIONS OF HERSHEY

1. REGULATION 55 Pa.Code §2600
 2600.125(b) - Combustible materials shall be inaccessible to residents.

2a. DESCRIPTION OF VIOLATION

There were two full "Blue Rhino" 15 pound propane tanks accessible to residents by the grill located at the rear patio of the facility.

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.

What: Combustible materials shall be inaccessible to residents

Who: Maintenance Director or designee assures combustibles are locked in cabinet when not in use, using **Plan of Correction Training Combustible Materials shall be inaccessible to residents (Attachment E)**. Fire safety expert will utilize **Combustible Tracking Checklist** on a weekly basis (**attachment F**).

When: Combustible materials removed immediately when identified on survey date, 1/9/19.

Combustible materials approved cabinet purchased 1/10/19 and materials stored 1/12/19.

How: Weekly audit by Maintenance Director or designee confirming combustible materials are secured in an approved combustible cabinet.

Ongoing: Maintenance Director or designee will unlock combustible cabinet only when necessary to use combustible materials. Maintenance Director or designee will return combustible materials to combustible cabinet after use and ensure cabinet is locked and secured.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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 (Required on EVERY Page) *Sarah K McConnell*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Sarah K McConnell, Administrator* Date *2/8/19*

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Sarah K McConnell

Plan of Correction Training

Combustible Materials shall be inaccessible to residents

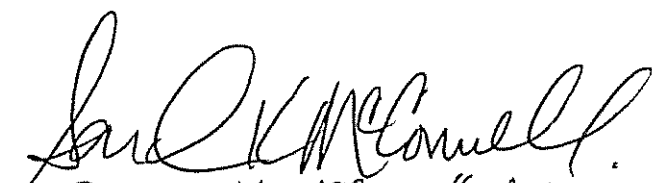
Attachment E

2600.125(b) - Combustible materials shall be inaccessible to residents

Discussion: This does not include personal items such as hair spray, matches, lighters, or aerosol air fresheners. Remember that residents' assessments and support plans (see § 2600.225 and § 2600.227) must indicate that residents can safely use these items. "Combustible materials" means "materials that rapidly ignite, producing heat and/or light"; "flammable materials" means "materials capable of being readily or easily ignited."

Primary Benefit: Combustible materials can be ignited by heat sources, sparks, or static electricity, causing injury to residents or damage to the home.

Action Plan: Maintenance Director or designee to preform weekly check of combustibles, ensuring all combustibles are locked in the appropriate secure combustible cabinet. Combustibles to only be removed when in use and returned after use to be locked and secured.


Sarah K. McConnell, Administrator 2/18/19

Violation Report: 33260 - 01/09/2019 - Hoover, Douglas
 PCH Name: TRADITIONS OF HERSHEY

1. REGULATION 55 Pa.Code §2600
 2600.132(h) - Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

2a. DESCRIPTION OF VIOLATION
 All residents did not evacuate during the following fire drills:
 On 2/15/2018, at 11:33 pm, 2 residents with the flu did not evacuate
 On 7/8/2018, at 2:11 pm, 1 hospice resident did not evacuate
 On 8/21/2018, at 8:32 pm, 2 residents refused to evacuate
 On 9/20/2018, at 12:24 am, 1 resident refused to evacuate

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.

What: All residents must evacuate for every fire drill

Who: Fire safety expert will conduct fire drill and ensure all residents safely evacuate for all fire drills, **Plan of Correction Training All Residents Did Not Evacuate During Specified Fire Drills (Attachment G)**. Fire safety expert will verify successful fire drill by completing **Fire Drill Worksheet (Attachment H)** after each fire drill followed by completing **Adult Residential Licensing - Personal Care Home Fire Drill Record (Attachment I)**.

When: Fire drill will be re-done within the month conducted if all residents in community at time of drill do not evacuate.

How: Post fire drill audit by fire safety expert to ensure all residents safely evacuated during fire drill.

Ongoing: Fire safety expert will review each fire drill worksheet to ensure all residents are evacuating for every fire drill.

The home will hold additional training for all staff on the home's evacuation procedures to ensure that all staff are aware of their role in an evacuation. Documentation of training will be kept by the home. Residents will also be educated on the importance of evacuating quickly. The monthly fire drills will be discussed at the home's periodic quality management reviews. - GE

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Plan of Correction Training

All Residents Did Not Evacuate During Specified Fire Drills


Attachment G

2600.132(h) - Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

Discussion: This regulation intends that the home designate one meeting place so that staff persons and emergency personnel can quickly check to determine if all residents have been evacuated. However, if it is absolutely necessary due to exit paths and mobility of the residents to have multiple external meetings places, both meeting places must be able to be checked by staff within 30 seconds (in person or through electronic communication such as cell phones or walkie-talkies) to ensure that residents' supervision needs are met. There may be more than one internal designated meeting if the home is equipped with more than one fire-safe area, in that each area will have a designated meeting place within the fire-safe area. Remember that a sufficient number of staff must be present on each shift at all times to allow homes to account for the number of residents in each area. This is also important during drills to verify that evacuations are completed within the time specified by a fire-safety expert. Equipping staff with communication devices is recommended in the fire safe areas to be able to immediately talk with staff in all of the other fire safe areas to ensure that all residents in the home are accounted for. Each staff person must be trained to know to which fire safe area (s)he is to be present in if a fire or fire drill occurs.

Primary Benefit: Designated meeting places and communication systems ensure that residents are accounted for during actual fires to ensure total evacuation and prevent death or injury from wandering.

Action Plan: All residents will be evacuated and accounted for by direct care staff for all fire drills. Fire safety expert to conduct drills monthly to ensure proper evacuation/safety during each drill.


Sarah K. McConnell, Administrator 2/8/19