



MAILING DATE: February 12, 2020

Ms. Tammy Hixenbaugh, LPN
Administrator
Transitions Healthcare Washington PA, LLC
90 Humbert Lane
Washington, Pennsylvania 15301

RE: Transitions Healthcare Washington PA
License #: 445990

Dear Ms. Hixenbaugh:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on October 10, 2019 and October 16, 2019, of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read "Janine Wenzig". The signature is fluid and cursive.

Janine Wenzig
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

RECEIVED

JAN 27 2020

Violation Report

WEST REGION FIELD OFFICE

1000 PENNSYLVANIA AVE, SUITE 2000

Facility Information

Name: TRANSITIONS HEALTHCARE WASHINGTON PA

License Number: 44599

Address: 90 HUMBERT LANE,, WASHINGTON, PA 15301

County: WASHINGTON

Region: WESTERN

Administrator

Name: KELLY WRIGHT

Phone: 7242285666

Email:

THIXENBAUGH@TRANSITIONSHEALTHCARELLC.COM

Legal Entity

Name: TRANSITIONS HEALTHCARE WASHINGTON PA LLC

Address: 90 HUMBERT LANE, WASHINGTON, PA, 15301

Certificate(s) of Occupancy

Type: C-1

Date: 01/31/1985

Issued By: PA Dept. of Health

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 43

Waking Staff: 32

Inspection

Type: Full

BHA Docket #:

Notice: Unannounced

Reason: Renewal

Inspection Dates and Department Representative

10/10/2019 - On-Site: Lisa Flinner-Alman, Trish Bartlett

10/16/2019 - On-Site: Lisa Flinner-Alman

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 48

Residents Served: 33

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 4

Number of Residents Who:

Receive Supplemental Security Income: 2

Are 60 Years of Age or Older: 33

Diagnosed with Mental Illness: 7

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 10

Have Physical Disability: 2

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TRANSITIONS HEALTHCARE WASHINGTON PA

JAN 27 2020

44599

81b Resident Personal Equipment

Regulations

2600.

81.b. Wheelchairs, walkers, prosthetic devices and other apparatus used by residents must be clean, in good repair and free of hazards.

Description of Violation

There was an enabler with a pocket on the right side of resident #1's bed. There were openings approximately 12" by 8" between the top of the pouch and the curved handle, and under the pocket and the curved handle, posing an entrapment hazard.

Both of resident #2's vinyl wheelchair armrests were completely cracked exposing the fabric below, posing a skin tear hazard.

Resident #3's left wheelchair arm rest was cracked, posing a skin tear hazard.

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.)

Violation: 2600.81.b.

Resident #1's enabler is covered and correction was made immediately when violation was found.

Administrator and/or designee educated staff and the resident and resident family on the importance of keeping the enabler covered for safety.

Administrator and/or Designee will monitor to assure that the enabler is covered daily for safety.

Resident's #2 and #3 wheel chair armrests have been replaced and are without any cracks. All wheelchairs have been checked for cracks on arm rests.

Administrator and/or designee educated staff on the importance of checking and replacing any wheelchair arm rests that are cracked to prevent the potential risk of skin tears.

Administrator and/or designee along with staff will check wheelchairs daily for any cracks in the arm rests.

Signature *Kelly Wright*

Printed Name and Title *Kelly Wright, Administrator 1-24-2020* Date

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The above plan of correction is approved as of 02/05/2020 (Date) Plan of correction implementation status as of 02/05/2020 (Date)

Implemented Not Implemented

The above plan of correction was approved by *[Signature]* (Initials)

JAN 27 2020

TRANSITIONS HEALTHCARE WASHINGTON PA

44599

WEST REGION FIELD OFFICE

85e - Trash Outside Home

Regulations

2600.

85.e. Trash outside the home shall be kept in covered receptacles that prevent the penetration of insects and rodents.

Description of Violation

On 10/10/19 at approximately 9:15 a.m., there were two large commercial dumpsters overflowing with multiple trash bags, preventing the lids from closing. Also, approximately 40 large trash bags were on the ground next to the dumpsters.

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.)


Violation: 2600.85.e.

The Sanitation Company was contacted to remove the trash from the dumpster and lids were closed. On the day of survey the sanitation company forgot to pick up the trash and Maintenance Director called to have it removed.

Administrator and/or designee educated Maintenance Director and staff on the importance of keeping lids closed on dumpster and keeping the surrounding area outside of the dumpster free of trash. This will prevent a potential issue with rodents and insects.

Administrator and/or Designee as well as Maintenance Director will do ongoing monitoring to assure that the lids are closed and the area surrounding the dumpster is free of trash.

Legal Entity Representative



Signature

Kelly Wright, Administrator 1-24-2020
Printed Name and Title Date

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JAN 27 2020

TRANSITIONS HEALTHCARE WASHINGTON PA

WEST REGION FIELD OFFICE

44599

95 - Furniture and Equipment

Regulations

2600.

95. Furniture and Equipment - Furniture and equipment must be in good repair, clean and free of hazards.

Description of Violation

The faucet in the sink is loose and moves approximately 1/2" back and forth in room 106 and the the cold water set-screw is missing.

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.)

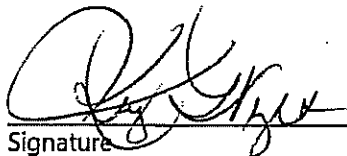
Violation: 2600.95

The faucet in room 106 has been fixed. All faucets in all rooms have been checked to assure that they are tight and are functioning properly.

Administrator and/or designee instructed and educated staff on the assuring that the faucets are not loose and are functioning as well as any other equipment that is not working properly.

Administrator and/or Designee as well as the Maintenance Director will do ongoing monitoring to assure that faucets are not loose and are working order.


Legal Entity Representative


Signature

Kelly Wright, Administrator 1-24-2020
Printed Name and Title Date

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TRANSITIONS HEALTHCARE WASHINGTON PA

44599

WEST REGIONAL FIELD OFFICE

101o Walls, Floors, Ceilings

Regulations

2600.

101.o. The bedrooms must have walls, floors and ceilings, which are finished, clean and in good repair.

Description of Violation

There were water stains on two ceiling tiles near the sprinkler head in room 107. The stains measured approximately 12" by 12" in a triangular shape covering both tiles.

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.)

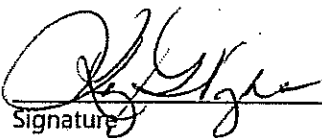
Violation: 2600.101.o.

The tiles in room 107 were removed and replaced with new tiles and are free of stains. All rooms were checked by the Maintenance Director to assure that all tiles are clean and intact.

Administrator and/or designee educated Maintenance Director on the importance of keeping the tiles replaced if they should become damaged or stained.

Administrator and/or Designee will do an ongoing inspection of all rooms and common areas to assure that the tiles are clean and intact and not damaged.

Legal Entity Representative


Signature

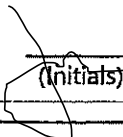
Kelly Wright, Administrator 1-24-2020
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TRANSITIONS HEALTHCARE WASHINGTON PA

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121a - Unobstructed Egress

Regulations

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

On 10/10/19, furniture blocked the hallway to the right of the 1st floor elevator leading to the emergency exit stairwell and exterior emergency exit door, including: two hospital beds, a lounge chair and three mattresses, several dining carts.

On 10/10/19, multiple items blocked the hallway leading to the emergency exit to the left of the 1st floor elevator, including: a 6' ladder, hand truck, commercial fan, tray table, and a rollator walker.

Plan of Correction (POC)

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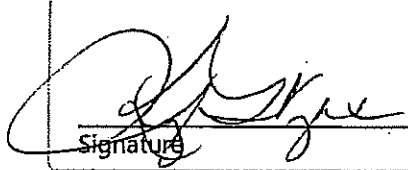
Violation: 2600.121.a.

The means of egress and emergency exit routes will remain unobstructed to emergency exit routes.

Administrator and/or designee instructed and educated Maintenance Director of the importance of keeping all emergency exit routes and egress unobstructed.

Ongoing monitoring will be completed by Maintenance Director and a report will be given to the safety committee monthly to assure ongoing compliance. Inspection of the area will be ongoing, and daily. - JRW 2/5/20

Legal Entity Representative



Signature

Kelly Wright, Administrator
Printed Name and Title
1/24/2020
Date

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126a - Furnace Inspection

Regulations

2600.

126.a. A professional furnace cleaning company or trained maintenance staff person shall inspect furnaces at least annually. Documentation of the inspection shall be kept.

Description of Violation

There were no furnace inspections for the two electric furnaces in the med tech room in the past year.

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.)

Violation: 2600.126.a.

The 2 electric furnaces were cleaned and inspected per manufacturer on 7-29-2019 by Gross Industrial Construction Company. See attached documentation.

Administrator and/or designee educated and instructed Maintenance Director on the furnaces being inspected and cleaned yearly per stated regulations and manufacturer recommendations.

Administrator and/or Designee as well as Maintenance director will keep a log of all inspection for furnaces yearly.


Legal Entity Representative


Signature

Kelly Wright Administrator 1/24/2020
Printed Name and Title Date

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TRANSITIONS HEALTHCARE WASHINGTON PA

44599

WEST REGION FIELD OFFICE

132d - Evacuation

Regulations

2600.

132.d. Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert. For purposes of this subsection, the fire safety expert may not be a staff person of the home.

Description of Violation

Six minutes 30 seconds is the home's safe evacuation time as determined by a fire safety expert in a letter dated 1/31/19. The home exceeded this evacuation time during the following fire drills:

- 2/28/19 at 3:05 p.m., 8 minutes
- 3/31/19 at 11:20 p.m., 7 minutes
- 9/30/19 at 5:30 a.m., 8 minutes

Plan of Correction (POC)

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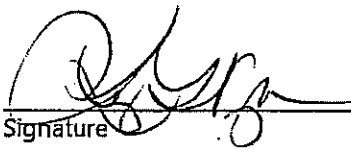
Violation: 2600.132.d.

A witnessed fire evacuation was conducted by South Strabane Fire Chief on 10-15-2019. The evacuation time was 6min and 25 secs. See attached documentation of Supervised Fire Drill.

Administrator and/or designee instructed and educated Maintenance Director on yearly scheduled fire drills conducted by the Fire Safety Expert to assure that the evacuation times are meeting the recommended times as per the fire safety expert.

Administrator and/or Designee/Maintenance Director will conduct drills monthly to assure timely evacuations times as per fire safety expert recommendations are being attained.

Legal Entity Representative


Signature


Kelly Wright, Administrator 1-24-2020
Printed Name and Title Date

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TRANSITIONS HEALTHCARE WASHINGTON PA

JAN 27 2020

44599

132e - Fire Drill Sleeping Hours

Regulations

2600.

132.e. A fire drill shall be held during sleeping hours once every 6 months.

Description of Violation

There were no sleeping hours fire drills conducted in the past 12 months.

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.)

Violation: 2600.132.e.

A fire drill was conducted on 6-28-2019 at 5:45am during sleeping hours. See attached Fire Drill documentation.

Administrator and/or designee instructed and educated Maintenance Director to conduct fire drill during sleeping hours every 6 months.

Administrator and/or Designee instructed Maintenance Director to schedule a sleeping fire drill with the Administrator and/or designee that will be monitored yearly for completion. A report will be given to the safety committee to assure ongoing compliance.

A sleeping hours fire drill was conducted on 12/5/19 at 4:15 a.m. - JRW 2/07/2020

Legal Entity Representative

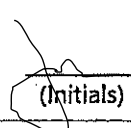

Signature

Kelly White Administrator 12/4-2020
Printed Name and Title Date

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- Not Implemented

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TRANSITIONS HEALTHCARE WASHINGTON PA

44599

144c1 - Smoking Area Guidelines

Regulations

2600.

144.c. A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures that include the following:

- 1. Proper safeguards inside and outside of the home to prevent fire hazards involved in smoking, including providing fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the home, extinguishing procedures, fire resistant furniture both inside and outside the home and fire extinguishers in the smoking rooms.

Description of Violation

In the home's outside designated smoking area, the ashtray was overflowing and there were approximately 30 cigarette butts on the ground.

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.)

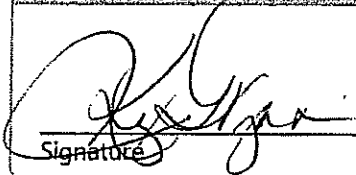
Violation: 2600.144.c.

Housekeeping removed cigarette butts from around the designated smoking area.

Administrator and/or designee instructed and educated all staff that all cigarette butts are to be disposed of properly in receptacles that are provided. Housekeeping staff was instructed to clean receptacles when full and check them daily.

Ongoing monitoring will be completed by Housekeeping Director and Housekeeping staff to assure that the grounds are clear of cigarette butts. Report will be given to the safety committee monthly to assure ongoing compliance. Inspection of the area will be ongoing.

Legal Entity Representative


Signature

Kelly Naylor Administrator 1-24-2020
Printed Name and Title Date

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(Initials) Implemented Not Implemented