



CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: July 16, 2014

Ms. Doreen Diesel, Administrator
UPMC Senior Communities
200 Lothrop Street, Forbes Tower
Pittsburgh, Pennsylvania 15213

RE: Strabane Woods of Washington
319 Wellness Way
Washington, Pennsylvania 15301
445420

Dear Ms. Diesel:

As a result of the Department of Public Welfare's licensing inspection on July 16, 2014 of the above facility, a violation with 55 Pa.Code Ch. 2800 (relating to Assisted Living Residences) specified on the enclosed License Inspection Summary was found.

The violation specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2800 must be maintained.

Sincerely,

A handwritten signature in cursive script that reads "Gloria Emick".

Gloria Emick
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

LICENSING INSPECTION SUMMARY
Assisted Living Residences - 55 Pa.Code § 2800

Name of Residence: Strabane Woods of Washington

Address: 319 Wellness Way, Washington, Pennsylvania 15301

License Number: 445420

Type of Inspection: Partial

Reason(s) for Inspection: Complaint

Notice: Unannounced

On-site Inspection Dates and Department Representatives On-site:
7/1/14 – Israel Springs

Off-site Inspection Dates and Department Representatives, if Applicable:

RECEIVED

JUL 16 2014

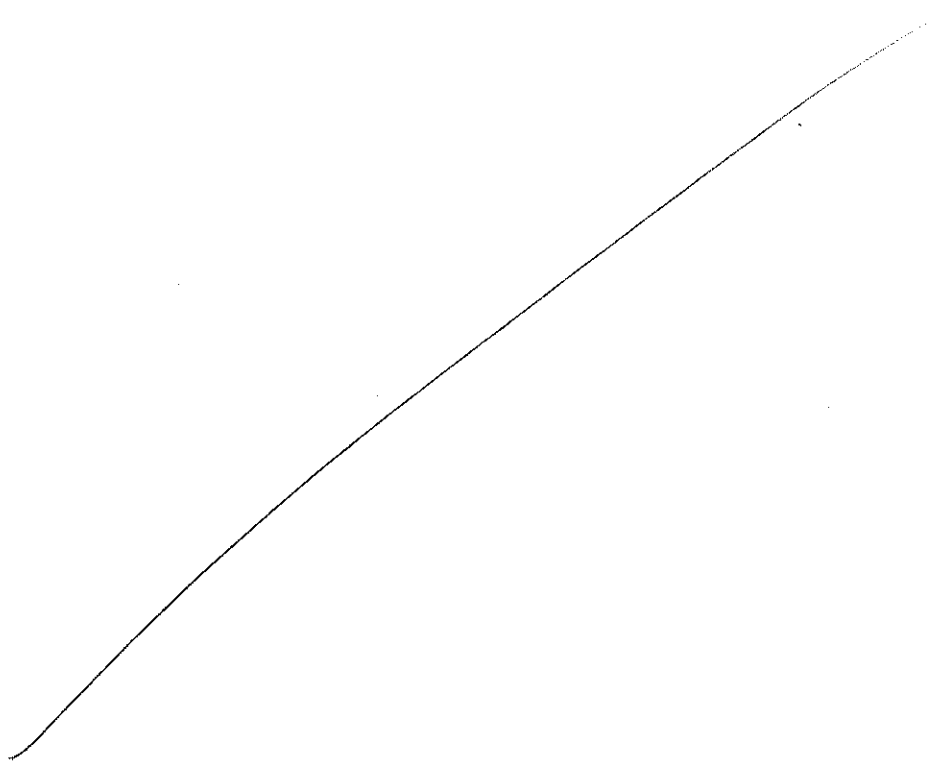
CENTRAL REGION FIELD OFFICE
Human Services Licensing

LIS - [Strabane Woods] - (7/1/14) - [Israel Springs]

Regulation: § 2800.56(b)(1) If the administrator is unavailable to meet the hourly requirements in subsection (a) due to a temporary absence, the administrator shall assign an administrator have 3,000 hours of direct operational responsibility for a senior housing facility, health care facility, residential care facility, adult daily living facility or other group home licensed or approved by the Commonwealth.

Violation: Staff A was left in charge of the assisted living community under the title of designee but in review of staff training, there is no record of any of required training for a designee.

Plan of Correction



Withdrawn per Gloria Emick GE

Printed Name and Title of Legal Entity Representative (Required on all pages)
Doreen Diesel, RNDCHA

Signature of Legal Entity Representative (Required on all pages)
[Handwritten Signature]

Date 7.15.14

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of _____ (Date)

The above plan of correction was approved by _____ (Initials)

Plan of correction implementation status as of _____ (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

LIS - [Strabane Woods] - (7/1/14) - [Israel Springs]

Regulation: § 2800.56(b)(2) If the administrator is unavailable to meet the hourly requirements in subsection (a) due to a temporary absence, the administrator shall assign an administrator who has passed the Department-approved competency-based administrator training test under § 2800.64(a)(3) (relating to administrator training and orientation.)

Violation: Staff A was listed as the designee and in the month of holding this position had not passed the Department-approved competency-based administrator training test.

Plan of Correction

Withdrawn per Gloria Emick *GE*

Printed Name and Title of Legal Entity Representative (Required on all pages)

Doreen Diesel, RD, PCWA

Signature of Legal Entity Representative (Required on all pages)

Doreen Diesel, RD, PCWA

Date

7-15-14

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- Not Implemented

The above plan of correction was approved by _____ (Initials)

LIS - [Strabane Woods] - (7/1/14) - [Israel Springs]

Regulation: § 2800.56(b)(3) If the administrator is unavailable to meet the hourly requirements in subsection (a) due to a temporary absence, the administrator shall assign an administrator must meet the qualification and training requirements of a direct care staff person under § § 2800.54 and 2800.65 (relating to qualifications for direct care staff persons; and staff orientation and direct care staff person training and orientation).

Violation: The Administrative Assistant is listed as a possible designee in the absence of the Administrator, and has not completed the direct care training as outlined under 2800.54 and 2800.65.

Plan of Correction

[Large diagonal line drawn across the plan of correction section]

with drawn per Gloria Emick

GE

Printed Name and Title of Legal Entity Representative (Required on all pages)
Allen Diesel, RN, PCA

Signature of Legal Entity Representative (Required on all pages)
Allen Diesel, RN, PCA

Date
7-15-14

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of _____
(Date)

Plan of correction implementation status as of _____
(Date)

The above plan of correction was approved by _____
(Initials)

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LIS - [Strabane Woods] - (7/1/14) - [Israel Springs]

Regulation: § 2800.121(a) Stairways, hallways, doorways, passageways and egress routes from living units and from the building must be unlocked and unobstructed.

Violation: The door of the private dining room has an exit sign over the door. Residents' walkers were in front of the door blocking the egress.

Plan of Correction

In reference to regulation 2800.121(a); resident walkers will not be placed in front of door/exits due to safety concerns. When noted the resident walkers were removed from the doorway. Staff members were educated about placement of the resident's walkers. Staff is to be on alert during the 3 meal times that walkers are not blocking door/exit. Staff were shown a location to place walkers during meal time in compliance with 2800.121(a). (See Attachment A.)

Signage was placed on the two dining room doors reminding residents not to place their walkers in front of the door/exit. (See Attachment B)

Dining room and nursing staff will monitor compliance of 2800.121(a) going forward.

Printed Name and Title of Legal Entity Representative (Required on all pages)

Doreen Diesel, RN, PCA

Signature of Legal Entity Representative (Required on all pages)

[Signature], RN, PCA

Date

7.15.14

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 7-16-14
(Date)

Plan of correction implementation status as of 7-16-14
(Date)

The above plan of correction was approved by BZ
(Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented