February 20, 2020

Rachelle Oliverson, Administrator
Franklin County Transitional Care
44 North 100 East
Preston, ID 83263-1326

Provider #: 135059

RE:  FACILITY FIRE SAFETY & CONSTRUCTION SURVEY REPORT COVER LETTER

Dear Ms. Oliverson:

On February 13, 2020, a Facility Fire Safety and Construction survey was conducted at Franklin County Transitional Care by the Bureau of Facility Standards/Department of Health & Welfare to determine if your facility was in compliance with State Licensure and Federal participation requirements for nursing homes participating in the Medicare and/or Medicaid programs. Your facility was found to be in substantial compliance with Federal regulations during this survey.

Enclosed is a Statement of Deficiencies/Plan of Correction, Form CMS-2567, which states that the facility complies with the requirements of CFR 42, 483.70(a) of the federal requirements. This form is for your records only and does not need to be returned.

Thank you for the courtesies extended to us during the survey. If you have any questions, please contact this office at (208) 334-6626, option 3.

Sincerely,

Nate Elkins, Supervisor
Facility Fire Safety and Construction

NE/lj
Enclosure
### STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

<table>
<thead>
<tr>
<th>ID</th>
<th>PREFIX</th>
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<tr>
<td>K000</td>
<td>INITIAL COMMENTS</td>
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**The facility is a single story Type II (111) structure, originally constructed in 1971. The building is fully sprinklered with an interconnected fire alarm/smoke detection system protecting corridors and open spaces. The facility is connected to the Critical Access Hospital and is two-hour separated. There is an on-site, diesel-fired Emergency Power Supply System (EPSS) generator which supplies backup emergency power. Currently the facility is licensed for 35 SNF/NF beds and had a census of 28 on the date of the survey.**

The facility was found to be in substantial compliance during the annual fire/life safety survey conducted on February 13, 2020. The facility was surveyed under the LIFE SAFETY CODE, 2012 Edition, Existing Health Care Occupancy, in accordance with 42 CFR 483.70.

The survey was conducted by:

Linda Chaney  
Health Facility Surveyor  
Facility Fire Safety & Construction
February 20, 2020

Rachelle Oliverson, Administrator
Franklin County Transitional Care
44 North 100 East
Preston, ID 83263-1326

Provider #: 135059

RE: EMERGENCY PREPAREDNESS SURVEY REPORT COVER LETTER

Dear Ms. Oliverson:

On February 13, 2020, an Emergency Preparedness survey was conducted at Franklin County Transitional Care by the Bureau of Facility Standards/Department of Health & Welfare to determine if your facility was in compliance with Federal participation requirements for nursing homes participating in the Medicare and/or Medicaid programs. Your facility was found to be in substantial compliance with Federal regulations during this survey.

Enclosed is a Statement of Deficiencies/Plan of Correction, Form CMS-2567, which states that the facility complies with the requirements of CFR 42, 483.70(a) of the federal requirements. This form is for your records only and does not need to be returned.

Thank you for the courtesies extended to us during the survey. If you have any questions, please contact this office at (208) 334-6626, option 3.

Sincerely,

Nate Elkins, Supervisor
Facility Fire Safety and Construction

NE/lj
Enclosure
**STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION**

<table>
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<tr>
<th>PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:</th>
<th>MULTIPLE CONSTRUCTION</th>
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<tbody>
<tr>
<td>135059</td>
<td>A. BUILDING:</td>
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<td>B. WING:</td>
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**NAME OF PROVIDER OR SUPPLIER**

FRANKLIN COUNTY TRANSITIONAL CARE

**STREET ADDRESS, CITY, STATE, ZIP CODE**

44 NORTH 100 EAST
PRESTON, ID 83263

**DATE SURVEY COMPLETED**

02/13/2020

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**SUMMARY STATEMENT OF DEFICIENCIES**

**E000 Initial Comments**

The facility is a single story Type II (111) structure, originally constructed in 1971. The building is fully sprinklered with an interconnected fire alarm/smoke detection system protecting corridors and open spaces. The facility is connected to the Critical Access Hospital and is two-hour separated. There is an on-site, diesel-fired Emergency Power Supply System (EPSS) generator which supplies backup emergency power. Currently the facility is licensed for 35 SNF/NF beds and had a census of 28 on the date of the survey.

The facility was found to be in substantial compliance during the annual Emergency Preparedness Survey conducted on February 13, 2020. The facility was surveyed under the Emergency Preparedness Rule established by CMS, in accordance with 42 CFR 483.73.

The Survey was conducted by:

Linda Chaney
Health Facility Surveyor
Facility Fire Safety & Construction

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Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.