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WY Dept of Health
JUL 13 2012
Healthcare Licensing and Surveys

PRINTED: 07/03/2012
FORM APPROVED

Healthcare Licensing and Surveys

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	WY0018	A. BUILDING B. WING	06/21/2012

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
KINDRED TRANSITIONAL CARE AND REHABII	3128 BOXELDER DRIVE CHEYENNE, WY 82001

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
SNH	LIC REGS FOR NURSING HOMES	SNH		

SNH — Summary Statement of Deficiencies:

This State Rules and Regulations is not met as evidenced by:
Wyoming Department of Health Aging Division Rules and Regulations for Program Administration of Nursing Care Facilities Chapter 11

Section 6. Physical Environment.

(a) The building(s) of the Nursing Care Facility shall be constructed, arranged and maintained to ensure the health and welfare of all residents.
(A) (iv) Shower/bath and resident lavatories shall be set to provide water of a temperature not to exceed 110 degrees Fahrenheit (F).

Based on observation, staff interview, and review of the facility maintenance log, the facility failed to ensure water temperatures did not exceed the maximum temperature in four randomly selected rooms (#101, #105, #107, #118). The findings were:

Observation on 6/20/12 at 1:15 PM revealed the hot water temperatures in resident rooms 101, 105, 107, and 118 located at one of four nursing stations, exceeded 110 degrees F. The temperatures were 118, 116, 116 and 116 degrees Fahrenheit, respectively. During an interview with the maintenance director on 6/20/12 at 2:10 PM, he stated he was not aware the water temperatures were above 110 degrees F. He stated he usually checked water temperatures in resident rooms once a week. Review of the facility maintenance log showed the last recorded water temperature in resident rooms was on 2/28/12. The maintenance director confirmed he had no documented information for

SNH — Provider's Plan of Correction:

This Plan of Correction is the center's credible allegation of compliance.

Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of federal and state law.

S-NH: Section 6 – Physical Environment

Corrective Action(s) for Those Residents Found to Have Been Affected by the Deficient Practice:

The Maintenance Director/Designee adjusted the water for all four (4) rooms. Of the four, two (2) rooms remained above the threshold of 110 degrees. The other two rooms held a temperature of 112 degrees.

The Maintenance Director has made arrangements with an outside vendor to replace the mixing valve for the entire Center on July 16, 2012. This repair will allow for us to regulate the water temperature to be below 110 degrees.

Wyoming Dept of Health, Aging Division, Healthcare Licensing and Surveys

[signature]
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE: Executive Director

(X6) DATE: 07-13-12

This POC accepted between Dan Stackis - Executive Director and Tery Madden, Surveyor on 7/19/12.

7/19/12

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SNH	LIC REGS FOR NURSING HOMES This State Rules and Regulations is not met as evidenced by: Wyoming Department of Health Aging Division Rules and Regulations for Program Administration of Nursing Care Facilities Chapter 11 Section 6. Physical Environment. (a) The building(s) of the Nursing Care Facility shall be constructed, arranged and maintained to ensure the health and welfare of all residents. (A) (iv) Shower/bath and resident lavatories shall be set to provide water of a temperature not to exceed 110 degrees Fahrenheit (F). Based on observation, staff interview, and review of the facility maintenance log, the facility failed to ensure water temperatures did not exceed the maximum temperature in four randomly selected rooms (#101, #105, #107, #118). The findings were: Observation on 6/20/12 at 1:15 PM revealed the hot water temperatures in resident rooms 101, 105, 107, and 118 located at one of four nursing stations, exceeded 110 degrees F. The temperatures were 118, 116, 116 and 116 degrees Fahrenheit, respectively. During an interview with the maintenance director on 6/20/12 at 2:10 PM, he stated he was not aware the water temperatures were above 110 degrees F. He stated he usually checked water temperatures in resident rooms once a week. Review of the facility maintenance log showed the last recorded water temperature in resident rooms was on 2/28/12. The maintenance director confirmed he had no documented information for	SNH	**Identification of Other Residents Having the Potential to be Affected by the Same Deficient Practice:** The Maintenance Director/Designee will conduct a facility-wide audit to confirm that water temperature in resident's room do not exceed 110 degrees. **Measures Put into Place/Systemic Changes Made to Ensure that the Deficient Practice(s) Does Not Recur** The Maintenance Director/Designee will incorporate into their routine rounds the inspection of water temperatures in resident's room to confirm the temperature does exceed 110 degrees.	

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SNH	Continued From page 1 resident room temperatures after 2/28/12. Interview with the maintenance director on 6/21/12 at 8 AM showed he had adjusted the mixing valve and planned to take additional water temperatures that day. The surveyor took temperatures at 7:45 AM just prior to the interview with the maintenance director and received the following readings: Rooms 101, 105, 108, and 113 had readings of 112, 112, 108, and 108 degrees Fahrenheit, respectively. Section 11. Dietetic Services 1. (a)(i) if the qualified supervisor is not a Registered Dietitian, S/he shall be a graduate of a dietetic technician program approved by the American Dietetic Association or a dietary managers' educational program approved by the Certifying Board for Dietary Managers. Training and experience in food service supervision and nutrition equivalent in content to the approved educational programs are acceptable. This standard was not met as evidenced by: Based on staff interview the facility failed to ensure the minimum qualifications were met for the dietary manager. The findings were: Interview with the dietary manager on 6/18/12 at 9:20 AM revealed she did not meet the requirement for being a certified dietary manager. She had been enrolled in a certification program about eight years earlier and did not complete the course at that time. Interview with the administrator on 6/21/12 at 10:30 AM revealed the dietary manager was hired with the expectation to be enrolled in a certification program for dietary managers, and they were aware she still needed to be enrolled in the course.	SNH	SNH: Section 11: Dietetic Services **Corrective Action(s) for Those Residents Found to Have Been Affected by the Deficient Practice:** No residents were affected by this deficient practice. **Identification of Other Residents Having the Potential to be Affected by the Same Deficient Practice:** No residents were affected by this deficient practice. **Measures Put into Place/Systemic Changes Made to Ensure that the Deficient Practice(s) Does Not Recur** The Nutritional Services Manager will enroll into the applicable course(s) to obtain the designation as a "certified dietary manager" by October 13, 2012.	

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