Healthcare Licensing and Surveys

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | ALF021 | A. BUILDING _____ B. WING _____ | 11/27/2012 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| WYOMING PIONEER HOME | 141 PIONEER HOME DRIVE THERMOPOLIS, WY 82443 |

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| SALF | LIC REGS FOR ASSISTED LIVING FACILITIES<br><br>A Life Safety Code survey was conducted at your facility on November 27, 2012 by the office of Healthcare Licensing and Surveys, (HLS).<br><br>The facility was a two story fully sprinkled facility of Type V (111) construction built in 2009, 2011 and 2012 with a basement. The facility was divided by 2-hour rated fire barrier walls into 14 smoke compartments. The building was equipped with a supervised automatic wet sprinkler system with an addressable fire alarm system. The facility had a capacity of 56 licensed beds with a census of 37 residents.<br><br>Wyoming Department of Health, Rules and Regulations for Licensure of Assisted Living Facilities Chapter 4<br>Section 10. Life Safety and Electrical Safety. The requirements in the Department of Health Chapter III, Construction Rules for Health Facilities apply.<br>(ii) Assisted Living Facilities operating prior to the effective date of these rules, shall meet the Life Safety Code of the National Fire Protection Association that was in effect at the time the facility was licensed as an Assisted Living Facility.<br><br>All references are based on the requirements of NFPA 101 Life Safety Code, New Board and Care, 2006 Edition, unless otherwise noted.<br><br>This regulation was NOT MET as evidence by:<br>_____ | SALF | | |



LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE: Facility Manager — (X6) DATE: 1/25/13







POC ACCEPTED W/ SHARON SKINNER, MANAGER, ON 1/25/13.

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| SALF | Continued From page 1<br><br>A. Based on observation and staff interview, the facility failed to ensure sprinkler heads were unobstructed in 5 of 14 smoke compartments and failed to ensure sprinkler piping was properly installed in 2 of 14 smoke compartments. The findings were:<br><br>1. Observation of the main maintenance shop on 11/27/12 between 1:30 PM and 2 PM showed five of six sprinkler heads were obstructed by concrete channels. The nearest concrete channel was 8 inches away and 1 ½ inch below the sprinkler deflector. Further observation showed the north basement storeroom had two of three heads obstructed by concrete channels. On 11/27/12 at 1:41 PM the building supervisor reported the sprinkler system installation occurred between April 2011 and to the present as each area is remodeled. He could not explain why the contractor had not inspected the heads to ensure they were not obstructed and would provide adequate fire protection.<br><br>2. Observation of the cottonwood public restroom on 11/27/12 at 3:14 PM showed the sprinkler head was obstructed by a ceiling step down. The sprinkler head was 12 inches from and 6 inches above the ceiling step down. At the time of the observation the building supervisor could not explain why this head had not been noticed and modified during the annual sprinkler inspection.<br><br>3. Observation of the sprinkler system on 11/27/12 between 3 PM and 4 PM showed sprinkler lines were exposed CPVC orange piping in Aspen Lane storage rooms A, C and D and Aspen Lane boiler room. The pipes were supported by hangers between 6 and 8 inches below the ceiling. The pipes were manufactured by Flame Guard. Review of the Spears Flame | SALF | A. It is the practice of the Wyoming Pioneer Home to meet the Life Safety Code of the National Fire Protection Association that was in effect at the time the facility was licensed as an Assisted Living Facility.<br><br>1. The five sprinkler heads in the main maintenance shop were moved into compliance by Rapid Fire on December 14, 2012. The 2 sprinkler heads in the north basement were moved into compliance by Rapid Fire on December 14, 2012.<br>a. The Maintenance Manager will be responsible to ensure that all exisiting sprinkler heads are in compliance with the Life Safety Code of the National Fire Protection Association that was in effect at the time the facility was licensed as an Assisted Living Facility.<br>b. The Maintenance Manager will report to the Quality Assurance Committee.<br>c. The Administrator will oversee the Quality Assurance Committee.<br><br>2. It is the practice of the Wyoming Pioneer Home to not have a sprinkler head that is obstructed by a ceiling step down.<br>a. One sprinkler head exists in the Public Restroom of the South Montgomery Wing. After recent field investigation, it has been determined that the wall of the soffit which causes the obstruction can be relocated away from the sprinkler head, alleviating the issue. This work will be performed by O'Dell Construction, and overseen by Dan Odasz of Plan One/Architects. This work will be completed by February 28, 2013.<br>b. The Maintenance Manager will be responsible to ensure work is completed correctly and in a timely matter. | 12/14/12<br><br>Waiver granted 1/24/13 |

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| SALF | Continued From page 2<br><br>Guard manufactures installation guide stated " CPVC Fire Sprinkler Products are UL listed for use in installations without protection (exposed) ... The piping must be mounted directly to the ceiling " . On 11/27/12 at 3:22 PM the building supervisor was unaware exposed CPVC pipe was required to be mounted directly to the ceiling or shielded. He could not explain why the sprinkler installation company had not followed the manufacturer ' s recommendations.<br><br>Reference, NFPA 101, 2006 Edition, 32.3.3.5.1, 9.7.1.1, NFPA 13, 2002 Edition;<br>6.3.6.1 Other types of pipe or tube investigated for suitability in automatic sprinkler installations and listed for this service, including but not limited to CPVC and steel, and differing from that provided in Table 6.3.1.1 or Table 6.3.6.1 shall be permitted where installed in accordance with their listing limitations, including installation instructions.<br>8.6.4.1.1.1 Under unobstructed construction, the distance between the sprinkler deflector and the ceiling shall be a minimum of 1 in. and a maximum of 12 in. throughout the area of coverage of the sprinkler.<br>Table 8.6.5.1.2 Positioning of Sprinklers to Avoid Obstructions to Discharge (Standard Spray Upright/Standard Spray Pendent)<br>Distance from sprinkler to side of obstruction — Maximum allowable distance from deflector above bottom of obstruction<br><br>Less than 1 ft ... ... ... ... ... ... ..... ....0<br>1 ft to less than 1 ft 6 in. ... ... ... ... ... ...2 ½<br>1 ft 6 in. to less than 2 ft .... ... ... ... .....3 ½<br>2 ft to less than 2 ft 6 in. ..... ... ... ... ....5 ½<br>2 ft 6 in. to less than 3 ft ... ... ... .....7 ½<br>3 ft to less than 3 ft 6 in ... ... .... ... ... ...9 ½ | SALF | c. The Maintenance Manager will report to the Quality Assurance Committee.<br>d. The Administrator will oversee the Quality Assurance Committee.<br><br>3. It is the practice of the Wyoming Pioneer Home to not have sprinkler lines exposed CPVC orange piping.<br>a. The solution to this issue is to replace the existing 210 degrees fire sprinkle heads that occur in the orange PVC lines with 155 degree heads. Thus, the fire sprinkler heads will discharge before the orange PVC pipe is compromised. This work will be performed by Rapid Fire under O'Dell Construction, and overseen by Dan Odasz of Plan One/Architects. This work will be completed by February 28, 2013.<br>b. The Maintenance Manager will be responsible to ensure work is completed correctly and in a timely matter<br>c. The Maintenance Manager will report to the Quality Assurance Committee.<br>d. The Administrator will oversee the Quality Assurance Committee. | Waiver granted 1/24/13 |

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| SALF | Continued From page 3<br>3 ft 6 in. to less than 4 ft ... ... ... ... ... ...12<br>4 ft to less than 4 ft 6 in. .....14<br><br>B. Based on observation, record review and staff interview, the facility failed to ensure the spare sprinkler cabinet had the adequate amount of heads and failed to ensure 1 of 4 sprinkler system components was tested. The findings were:<br><br>1. Observation of the spare sprinkler cabinet on 11/27/12 at 3:34 PM showed there were no spare 212 degree upright heads to replace the sprinkler heads installed in boiler room. At the time of the observation the building supervisor reported he relied upon the sprinkler contractor to provide the adequate sprinkler heads.<br><br>2. Review of the sprinkler system testing records showed the back flow preventer had not been tested in the last year. On 11/27/12 at 4:15 PM the building supervisor reported he was unaware the back flow preventer was required to be tested on an annual basis. He confirmed the facility did not have any testing records to review since the April 2011 acceptance test.<br><br>Reference, NFPA 101, 2006 Edition, 32.3.3.5.1, 9.7.1.1, NFPA 13, 2002 Edition, 18.1, NFPA 25, 2002 Edition;<br>2.4.1.4 A supply of at least six spare sprinklers shall be stored in a cabinet on the premises for replacement purposes. The stock of spare sprinklers shall be proportionally representative of the types and temperature ratings of the system sprinklers. A minimum of two sprinklers of each type and temperature rating installed shall be provided. The cabinet shall be so located that it will not be exposed to moisture, dust, corrosion, or a temperature exceeding 100 degrees | SALF | B. It is the practice of the Wyoming Pioneer Home to ensure that the spare sprinkler cabinet has the adequate amount of heads.<br><br>1. The Wyoming Pioneer Home has ordered the adquate amount of spare sprinkler heads for the sprinkler head cabinet from Rapid Fire.<br>a. The Maintanance Manager will be responsible to ensure that the spare sprinkler head cabinet always has an adequate amount of spare sprinkler heads.<br>b. The Maintenance Manager will report to the Quality Assurance Committee.<br>c. The Administrator will oversee the Quality Assurance Committee.<br><br>2. It is the practice of the Wyoming Pioneer Home to test all flow preventers that are installed in the fire protection system piping annually.<br>a. Rapid Fire has completed a back flow test for the Wyoming Pioneer Home fire system on 1/08/13.<br>b. The Wyoming Pioneer Home has signed a service agreement with Rapid Fire to complete a back flow test annually.<br>c. The Maintenance Manager will be responsible to ensure that the test is done annually.<br>d. The Maintenance Manager will report to the Quality Assurance Committee.<br>e. The Administrator will oversee the Quality Assurance Committee. | 12/14/12<br><br>1/7/13 |

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| SALF | Continued From page 4<br>Fahrenheit.<br>2.4.1.5 The stock of Spare Sprinklers shall be as follows:<br>(a) ...Under 300 sprinklers no fewer than 6 sprinklers<br>(b) ...300 - 1000 sprinklers no fewer than 12 sprinklers....<br>12.6.2.1 All backflow preventers installed in fire protection system piping shall be tested annually ...<br><br>C. Based on record review and staff interview, the facility failed to ensure the emergency generator and emergency battery lights were tested on a monthly basis. The findings were:<br><br>1. Review of the corridor lights showed they were supplied with emergency power from the stand by generator. Review of the generator testing records showed a new generator was installed in July 2012. Further review showed a monthly load test had not been performed since the July 2012 acceptance test. On 11/27/12 at 4:15 PM the building supervisor could not explain why the monthly test had not been performed.<br><br>2. Review of the emergency battery light testing records showed a monthly 30 second test had not been performed since installation in July 2012. On 11/27/12 at 4:15 PM the building supervisor could not explain why the monthly test had not been performed.<br><br>Reference NFPA 101, 2006 Edition, 32.3.2.9, 7.9.1.3 Where maintenance of illumination depends on changing from one energy source to another, a delay of not more than 10 seconds shall be permitted.<br>7.9.2.1* Emergency illumination shall be provided for not less than 1-1/2 hours in the event of failure | SALF | C. It is the practice of the Wyoming Pioneer Home to conduct a monthly load test on the generator.<br>1. The monthly load test for Wyoming Pioneer Home generator was conducted on 12/17/12 by the Wyoming Pioneer Maintenance Manager.<br>a. The Maintenance Manager will be responsible to ensure the monthly load tests for the Wyoming Pioneer Home generator are conducted.<br>b. The Maintenance Manager will report to the Quality Assurance Committee.<br>c. The Administrator will oversee the Quality Asssurance Committee.<br><br>2. The Wyoming Pioneer Home emergency battery lights were tested on 12/15/12 by the Wyoming Pioneer Home Maintenance Manager.<br>a. The Maintenance Manager will be responsible to ensure that all emergency battery lights are tested monthly.<br>b. The Maintenance Manager will report to the Quality Assurance Committee.<br>c. The Administrator will oversee the Quality Assurance Committee. | 1/17/12<br><br>1/15/12 |

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| SALF | Continued From page 5<br>of normal lighting. Emergency lighting facilities shall be arranged to provide initial illumination that is not less than an average of 1 ft-candle (10 lux) and, at any point, not less than 0.1 ft-candle (1 lux), measured along the path of egress at floor level. Illumination levels shall be permitted to decline to not less than an average of 0.6 ft-candle (6 lux) and, at any point, not less than 0.06 ft-candle (0.6 lux) at the end of the 1-1/2 hours. A maximum-to-minimum illumination uniformity ratio of 40 to 1 shall not be exceeded.<br>7.9.3 Periodic Testing of Emergency Lighting Equipment.<br>7.9.3.1.1 Testing of required emergency lighting systems shall be permitted to be conducted as follows:<br>(1) Functional testing shall be conducted at 30-day intervals for not less than 30 seconds.<br>(2) Functional testing shall be conducted annually for not less than 1-1/2 hours if the emergency lighting system is battery powered.<br>(3) The emergency lighting equipment shall be fully operational for the duration of the tests by 7.9.3.1.1 (1) and (2).<br>(4) Written records of visual inspections and tests shall be kept by the owner for inspection by the authority having jurisdiction.<br>7.9.2.3 Emergency generators providing power to emergency lighting systems shall be installed, tested, and maintained in accordance with NFPA 110, Standard for Emergency and Standby Power Systems ... | SALF | | |