PRINTED: 05/02/2013
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
	ALF006	A. BUILDING: _____ B. WING _____	04/24/2013

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ASPEN WIND ASSISTED LIVING COMMUNITY	4010 NORTH COLLEGE 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
SALF	LIC REGS FOR ASSISTED LIVING FACILITIES A Life Safety Code survey was conducted at your facility on April 23-24, 2013 by the office of Healthcare Licensing and Surveys, (HLS). The facility was a fully sprinklered, single story building of Type V (111) construction built in 1998 and 2010. The building was equipped with a supervised, automatic wet sprinkler system and an addressable fire alarm system. The facility had a capacity of 94 licensed beds, 48 beds were Level I and 46 beds were Level II. The facility had a census of 32 Level I residents and 39 Level II residents. Wyoming Department of Health, Rules and Regulations for Licensure of Assisted Living Facilities Chapter 4 Section 10. Life Safety and Electrical Safety. The requirements in the Department of Health Chapter III, Construction Rules for Health Facilities apply. (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. All references are based on the requirements of NFPA 101 Life Safety Code, New Board and Care 2000 Edition and New Health Care 2006 Editions, unless otherwise noted. This regulation was NOT MET as evidence by: ----------	SALF		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE Exec Dir — (X6) DATE 05/09/13

POC MODIFIED & ACCEPTED W/ SARAH GREEN, E.D., 5/20/13

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SALF	Continued From page 1 A. Based on record review and staff interview, the facility failed to ensure 1 of 7 fire alarm system components was tested. The findings were: Review of the fire alarm system testing records showed the fire alarm control panel battery load voltage test was last performed on 12/3/12. Further review confirmed the semi-annual load voltage test had not been performed on the batteries during the past six months. On 4/24/13 at 10:25 AM the maintenance director could not explain why the aforementioned test had not been performed. Reference NFPA 101, 2000 Edition, 32-2.3.4.1, 9-6.1.4, NFPA 72, 1999 Edition; Table 7-3.2 Testing Frequencies. 6. Batteries-Fire alarm systems d. Sealed Lead-Acid Type 1. Charge Test annually (Replace batteries every 4 years.), 2. Discharge Test (30 minutes), annually 3. Load Voltage Test, semi-annually --- Wyoming Department of Health Aging Division Rules Program Administration of Assisted Living Facilities Chapter 12 Effective December 12, 2007 Section 7. Assisted Living Facility (ALF) Core Services. (o) Evacuation Capability, Emergency Procedures, and Fire Safety. (i) Evacuation Capability. (A) The evacuation capability rating for the group of residents, as defined by the Life Safety Code, in accordance with licensure rules, shall meet	SALF	A. The load voltage test will be completed. ~~6/30/13~~ 6/22/13 All load voltage tests will be completed semi-annually by certified alarm company. This will be monitor by administrator's quarterly quality assurance; and issues will be documented and corrected.	

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SALF	Continued From page 2 prompt or slow for facilities with nine (9) or more residents, and the rating shall meet prompt for facilities of eight (8) or fewer residents. The facility shall be responsible for maintaining evacuation capability ratings by timed fire exit drills. (I) Exception shall be a facility where the construction meets the impractical evacuation capability rating. (B) Evacuation Capability Ratings: (I) Prompt - maximum of three (3) minutes (II) Slow - between three (3) and thirteen (13) minutes (III) Impractical - more than thirteen (13) minutes (III) Fire Safety. (E) Fire exit drills shall be conducted in accordance to the Life Safety Code Operating Features sections. The minimum number of drills, as amended, shall be held at least twelve (12) times per year on a monthly basis with a minimum of one drill conducted each quarter on each shift. Fire exit drill records over a two-year period shall be available upon request at the facility. (I) The facility shall be responsible for recording fire exit drills on an evaluation form that include at least the following: (1.) Date of drill; (2.) Time of day; (3.) Type of drill (Practice, Announced, Surprise); (4.) Residents who participated including staff and family members; (5.) Time required (minutes and seconds) to evacuate all residents (including staff) from the occupied areas to a point of assembly as defined in the Life Safety Code; (6.) List of anyone, including staff and family members, who did not evacuate in the required time allowed by the evacuation capability rating of the facility. Evacuation capability rating for each	SALF		

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SALF	Continued From page 3 facility shall be listed on the form; (7.) Comments on the factors that contributed to each individual ' s inability to evacuate successfully and any corrective actions recommended; and (8.) Signature and date of the person completing the form. This regulation was NOT MET as evidence by: B. Based on record review and staff interview the facility failed to ensure full evacuation fire drills were held on 2 of 3 shifts. The findings were: Review of the fire drill records showed the third shift occurred between 10 PM and 6 AM. Further review showed simulated fire drills were held on 6/29/12 at 11:40 PM and 12/29/12 at 2:03 AM without full evacuation of the assisted living residents. On 4/24/13 at 10:25 AM the maintenance director confirmed the aforementioned fire drills were simulations only and residents were not evacuated. He could not explain why the drills had not been conducted with full evacuation.	SALF	B. A full evacuation fire drill will be completed for third shift. Fires drills will be monitored for compliance by administrator's quarterly quality assurance; and issues will be documented and corrected.	~~6/30/13~~ 6/22/13