DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 05/13/2008
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	535043	A. BUILDING 01 - MAIN BUILDING B. WING	04/14/2008

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LARAMIE CARE CENTER	502 S 19TH ST LARAMIE, WY 82070

(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) COMPLETION DATE
K 000	INITIAL COMMENTS Requirements for Long Term Care Facilities Section 42 CFR 483.70 (a) except as otherwise provided in the section, the facility must meet the applicable provisions of the 2000 edition of the Life Safety Code, Existing Health Care, of the National Fire Protection Association. The facility was a fully sprinklered single story building of Type V (111) construction built in 1953, 1972 and 1986. The building was equipped with a supervised automatic wet sprinkler system with an anti-freeze branch and a fire alarm system. A TIME LIMITED WAIVER for K-056 is in effect until 6/30/08 for the installation of sprinkler heads in the walk-in freezers and under the front canopy.	K 000	POC accepted w/ Plan Narrative NHA, 05/14/08. K-052 The fire alarm system required for life safety will be tested and maintained in accordance with NFPA 70 National Electrical Code and NFPA72. The system will have an approved maintenance and testing program complying with applicable requirements of NFPA 70 and 72 The fire alarm annunciator panel batteries will be load voltage tested at least every 6 months and a log will be kept. The Maintenance Director will schedule the testing and will perform the load testing of the annunciator panel batteries every 6 months. The Maintenance Director will monitor for compliance. 5/31/08	
K 052 SS=D	NFPA 101 LIFE SAFETY CODE STANDARD A fire alarm system required for life safety is installed, tested, and maintained in accordance with NFPA 70 National Electrical Code and NFPA 72. The system has an approved maintenance and testing program complying with applicable requirements of NFPA 70 and 72. 9.6.1.4 This STANDARD is not met as evidenced by: Based on record review and staff interview the facility failed to test 1 of 9 fire alarm system	K 052		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

Ranae Nelson — Administrator — 4-17-08

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.

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LARAMIE CARE CENTER	503 S 18TH ST LARAMIE, WY 82070

5/14/08

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K 052	Continued From page 1 components. The findings were: 1. Review of the fire alarm system testing records revealed the annunciator panel batteries had not received a load voltage test in the past six months. The load voltage test was last performed on 5/03/07. 2. Interview with the maintenance director on 4/14/08 at 2:40 PM revealed he was unaware the load voltage test was supposed to be done semi-annually.	K 052		
K 062 SS=E	NFPA 101 LIFE SAFETY CODE STANDARD Required automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically. 19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5 This STANDARD is not met as evidenced by: Based on record review and staff interview the facility failed to test 2 of 3 fire sprinkler devices on a quarterly basis. The findings were: 1. Review of the fire sprinkler testing records revealed the supervisory signal and main drain devices were not tested during the fourth quarter of 2007. 2. Interview with the maintenance director on 4/14/08 at 2:40 PM revealed the devices were supposed to be tested by an outside contractor, but confirmed the devices were not tested during the fourth quarter.	K 062	K-062 The facility will maintain the installed sprinkler system in accordance with NFPA25 Section 2-2.1.1. The supervisory signal and main drain devices will be tested quarterly. The Maintenance Director will schedule a test every quarterly with the testing contractor. The Maintenance Director will monitor for compliance and will report quarterly to the QA committee. 5/31/08	
K 075 SS=D	NFPA 101 LIFE SAFETY CODE STANDARD	K 075		

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LARAMIE CARE CENTER	803 S 16TH ST LARAMIE, WY 82070

5/14/08

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K 075	Continued From page 2 Soiled linen or trash collection receptacles do not exceed 32 gal (121 L) in capacity. The average density of container capacity in a room or space does not exceed .5 gal/sq ft (20.4 L/sq m). A capacity of 32 gal (121 L) is not exceeded within any 64 sq ft (5.9-sq m) area. Mobile soiled linen or trash collection receptacles with capacities greater than 32 gal (121 L) are located in a room protected as a hazardous area when not attended. 19.7.5.5 This STANDARD is not met as evidenced by: Based on observation and staff interview the facility failed to ensure hazardous material receptacles were separated by 64 square feet in 1 of 13 smoke compartments. The findings were: Observation on 4/14/08 at 11:12 AM revealed two hazardous material collection receptacles were not separated by 64 square feet in resident room #27. Interview with the maintenance director at the time of observation revealed the nursing staff monitored the placement of all collection receptacles.	K 075	K-075 Soiled linen or trash collection receptacles will not exceed 32 gal capacity. Mobile soiled linen or trash collection receptacles with capacities greater than 32 gal will b e located in a room protected as a hazardous area when not attended. No trash or linen receptacle exceeding 32 gallons will be located in room #27 or any other room unless protected as a hazardous area when not attended. Facility management will make routine inspections. Administrator will monitor for compliance.	
K 147 SS=D	NFPA 101 LIFE SAFETY CODE STANDARD Electrical wiring and equipment is in accordance with NFPA 70, National Electrical Code. 9.1.2 This STANDARD is not met as evidenced by: Based on observation and staff interview the facility failed to ensure electrical appliances were	K 147	5/31/08	

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K 147	Continued From page 3 provided with safeguards to prevent damage. The facility failed to ensure there was an emergency battery light at the generator set and failed to ensure flexible temporary electrical wiring did not replace permanent fixed wiring. Three of 13 smoke compartments were effected by these failures. The findings were: 1. Observation on 4/14/08 at 11:39 AM revealed the electrical cord for the bed in resident room #40 had the insulation pulled back from the plug, which exposed live wires. Interview with the maintenance director at the time of observation revealed the electrical system was inspected monthly. 2. Observation on 4/14/08 at 11:42 AM revealed the automatic transfer switch did not have an emergency battery light. Interview with the maintenance director at the time of observation revealed he was unaware the area required an emergency battery light. 3. Observation on 4/14/08 at 1:27 PM revealed the paper shredder in the rehab office was plugged into an extension cord.	K 147	K-147 Electrical wiring and equipment is in accordance with NFPA 70 National Electrical Code:9.1.2. All electric bed cords will we maintained in good repair including the bed cord in room #40. An emergency battery light has been installed above the automatic transfer switch and is tested monthly and a 90 minute test is done yearly. All maintenance personnel are now aware of this light. The extension cord in the therapy room has been removed. The Maintenance Director will monitor for compliance. 5/2/08	