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

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 01 B. WING _____	06/04/2008

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LARAMIE CARE CENTER	503 S 16TH 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 42 CFR 483.70(a) K3 BUILDING: 0101 K6 PLAN APPROVAL: 1953, 1974, and 1986 K7 SURVEY UNDER: 2000 EXISTING K8 SNF TYPE OF STRUCTURE: Single-story building, with three stages of construction: The original section was built around 1953 and is of ordinary (mixed) construction - Type III (2,1,1,). The "Main" building was built around 1973 and the "East Wing" was built around 1986. These two sections are of protected wood-frame construction - Type V (1,1,1,). The entire facility is protected by (wet) automatic sprinkler system. A Comparative Federal Monitoring Survey was conducted on 06/04/08, following a State Survey Agency Survey on 04/14/08, in accordance with 42 Code of Federal Regulations, Part 483: Requirements for Long Term Care Facilities. At this Comparative Federal Monitoring Survey, Laramie Care Center was found not in substantial compliance with the Requirements for Participation for Medicare and Medicaid. The findings that follow demonstrate noncompliance with Title 42, Code of Federal Regulations, 483.70(a) et seq (Life Safety from Fire).	K 000		
K 052 SS=F	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	K 052		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Pam Nelson — TITLE: Administrator — (X6) DATE: 6-18-08

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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K 052	Continued From page 1 requirements of NFPA 70 and 72. 9.8.1.4 This STANDARD is not met as evidenced by: Based on interview and record review, the facility failed to assure that the fire alarm system was tested and maintained as required. This deficient practice affected all staff and residents. The facility has the capacity for 76 beds with a census of 73 the day of survey. Findings include: A review of facility fire alarm system records on 06/04/08 revealed no documentation of the required annual or semi-annual testing and inspections of the fire alarm system. The Director of Maintenance was interviewed on 06/04/08 at 2:00 p.m., and stated that he thought that the contractor who performed the inspections and tests of the facility's automatic sprinkler system also did the required inspections and tests of the fire alarm system. A review of the contractor's reports (for the past two years) of the inspections and tests of the sprinkler system revealed no testing or inspections of the fire alarm system. The census of 73 was verified by the Administrator on 06/04/08. The finding was acknowledged by the Administrator and verified by the Director of Maintenance at the exit interview on 06/04/08.	K 052	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 will be tested and the batteries will be load voltage tested at least every 6 months and a log will be kept. The contractor who installed the panel will do the testing and will perform the load testing of the annunciator panel batteries. The contractor will train the Maintenance Director to do the testing every six months.	

JUN-17-2008 16:02 OFFICE OF REGIONAL P.06

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K 052	Continued From page 2 Actual NFPA Standard: NFPA 72, Tables 7-3.1 and 7-3.2 list the required inspections and tests of the fire alarm system and their frequencies; Actual NFPA Standard: NFPA 72, Sect. 7-5.1 states that after successful completion of acceptance tests approved by the authority having jurisdiction, a set of reproducible as-built installation drawings, operation and maintenance manuals, and a written sequence of operation shall be provided to the building owner or the owner's designated representative. The owner shall be responsible for maintaining these records for the life of the system for examination by any authority having jurisdiction. Paper or electronic media shall be permitted.	K 052	The contractor will furnish a set of reproducible as-built installation drawings, operation and maintenance manuals, and a written sequence of operation shall be provided to the facility and the facility will be responsible for maintaining these records for the life of the system. The Maintenance Director will test the annunciator panel every six months. The Administrator will monitor for compliance. Correction Date: July 8, 2008	

TOTAL P.06