PRINTED: 01/14/2011
FORM APPROVED

WDH - Office of Healthcare Licensing and Surveys

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ALF008	A. BUILDING _____ B. WING _____	01/03/2011

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SIERRA HILLS ASSISTED LIVING COMMUNITY	4606 NORTH COLLEGE DRIVE CHEYENNE, WY 82009

(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	SALF		

A survey was conducted at your facility on January 03, 2011 by the Office of Healthcare Licensing and Surveys (OHLS).

The facility was a two story fully sprinkled building of Type V (111) construction built in 1997. The building was equipped with a supervised automatic wet sprinkler system and an addressable fire alarm system. The facility had a capacity of 100 licensed beds.

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, 2000 Edition, unless otherwise noted.

This regulation was NOT MET as evidenced by:

A. Based on observation and staff interview the facility failed to ensure hazardous areas were

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE 1/27/2011

STATE FORM 6899 81L811 If continuation sheet 1 of 6

RECEIVED
WyomingDeptofHealth
JAN 31 2011
Office of Healthcare Licensing and Surveys

POC Accepted w/ Sara Gregson, E.D. on 2/02/11

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SALF	Continued From page 1 separated from use areas in 1 of 6 smoke compartments. The findings were: Observation of the water heater room on 1/03/11 at 1:55 PM showed there were four unsealed pipe penetrations. The fire rated caulking adhering to the pipes had pulled away from the wall and left a ¼-inch wide gap. At the time of observation the maintenance manager reported hazardous areas were inspected quarterly. Furthermore, he reported that he did pay close attention to openings around pipes to ensure they remained sealed. Reference: 22-2.3.2 Hazardous Areas. Any hazardous area shall be protected in accordance with the following: (a) Any hazardous area that is on the same floor as, and is in or abuts a primary means of escape or a sleeping room, shall be protected by either: 1. An enclosure with a fire resistance rating of at least 1 hour ... 2. Automatic sprinkler protection, in accordance with 22-2.3.5, of the hazardous area and a separation that will resist the passage of smoke between the hazardous area and the sleeping area or primary escape route. Any door in such separation shall be self-closing or automatic-closing in accordance with 5-2.1.8. B. Based on record review and staff interview the facility failed to ensure 7 of 8 fire alarm system components were tested annually. The findings were: 1. Review of the fire alarm system testing records	SALF	A. Pipe penetrations for the hot water heaters were sealed with 3M Fire Barrier Sealant CP25WB. Pipe penetrations will be monitored by the environmental services manager's quarterly quality assurance; and issues will be documented, corrected and reported to the QA program.	1/12/2011

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SALF	Continued From page 2 showed the system had not been tested in the past year. The last test was performed on 5/19/09. On 1/03/11 at 3:55 PM the maintenance manager confirmed the tests had not been performed in the past year. He reported he was aware of the timing requirement; however, he could not explain why the system had not been tested. 2. Review of the fire alarm system testing records revealed the system inspection conducted on 5/19/09 showed 29 alarm notification devices (strobes and horns) were tested. On 1/03/11 at 3:55 PM the maintenance manager reported the facility had 83 resident rooms and every room had one or more alarm notification devices. Furthermore, he reported that the contractor only tested the devices in the corridor system. He confirmed the notification devices in the resident rooms had not been tested in the past year. Reference: 22-3.3.4.1 General, A fire alarm system in accordance with Section 7-6 shall be provided. 7-6.1.4 A fire alarm system required for life safety shall be installed, tested, and maintained in accordance with applicable requirements of ...NFPA 72, National Fire Alarm Code. NFPA 72, National Fire Alarm Code, 1993 Edition. Table 7-2.2 Test Methods 13. Initiating Devices g. Smoke Detectors. 2. Single Station Detectors. The detectors shall be tested in place to ensure smoke entry into the sensing chamber and an alarm response ... Table 7-3.2 Testing Frequencies. 1. Control Equipment-Buildings Connected to a Supervising Station a. Functions, annually	SALF	B. 1. Fire alarm system was tested by Cintas Fire Protection. Fire alarm system annual test will be monitored by the environmental services manager. Documentation and any issues will be reported to the quality assurance program. B.2. Alarm notification devices (horns and strobes) will be tested during the monthly fire drill. Alarm notification devices annual test will be monitored by the environmental services manager. Documentation and any issues will be reported to the quality assurance program.	02/01/2011 02/01/2011

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SALF	Continued From page 3 b. Fuses, annually c. Interfaced Equipment, annually d. Lamps and LED's, annually e. Primary Power Supply, annually f. Transponders, annually 6. Batteries-Fire alarm systems d. Sealed Lead-Acid Type 1. Charge Test (Replace batteries every 4 years.), annually 2. Discharge Test (30 minutes), annually 3. Load Voltage Test, semi-annually 14. Remote Annunciator, annually 15. Initiating Devices a. Duct Detectors, annually e. Heat Detectors, annually f. Fire Alarm Boxes, annually h. All Smoke Detectors, annually i. Smoke Detectors-Sensitivity, bi-annually j. Supervisory Signal Devices, quarterly k. Waterflow Devices, quarterly 19. Alarm Notification Appliances a. Audible Devices, annually c. Visible Devices, annually 23. Receivers, monthly --- C. Based on observation and staff interview the facility failed to ensure portable fire extinguishers were inspected on a monthly basis in 6 of 6 smoke compartments. The findings were: Observation of the first floor south laundry room on 1/03/11 at 11:17 AM showed the portable extinguisher had not received an inspection	SALF	C. Portable fire extinguishers were inspected by the environmental services manager. The portable fire extinguishers inspections will be monitored by the environmental services manager Documentation and any issues will be reported to the quality assurance program. ON A MONTHLY BASIS 01/14/2011	

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SALF	Continued From page 4 during the month of December 2010. At the time of observation the maintenance manager reported he was aware of the requirement, and did not know why the inspection had not been done. He also reported none of the other ten extinguishers had received the required inspection during December 2010. Reference: 22-3.3.5.3 Portable Fire Extinguishers. Portable fire extinguishers in accordance with 7-7.4.1 shall be provided near hazardous areas. 7-7.4.1 ....Portable fire extinguishers shall be installed in accordance with NFPA 10, Standard for the Installation of Portable Fire Extinguishers. NFPA 10 Standard for the Installation of Portable Fire Extinguishers, 1990 Edition. 4-3 Inspection. 4-3.1 Frequency. Extinguishers shall be inspected when initially placed in service and thereafter at approximately 30-day intervals .... --- E. Based on observation and staff interview the facility failed to ensure electrical equipment in wet locations had ground fault circuit interrupter (GFCI) protection and failed to ensure temporary electrical wiring did not replace permanent fixed wiring in 4 of 6 smoke compartments. The findings were: 1. Observation of the first floor south laundry room on 1/03/11 at 11:15 AM showed the two electrical outlets behind the washing machines did not have GFCI protection. At the time of observation the maintenance manager reported he was aware of the GFCI requirement. He did not know why the outlets had not been replaced.	SALF	E.1. The electric outlets in the south laundry room GFCI protection was replaced with that have GFCI protection. Electric outlets will be monitored for GFCI protection by the environmental services manager Documentation and any issues will be reported to the quality assurance program. E.2. The extension cord was removed from apartment 103, the 2-way adapter was removed from apartment 123 and the extension cord was removed from apartment 126. Environmental services manager will conduct monthly QA audits of all apartments. Documentation and any issues will be reported to the quality assurance program.	01/7/2011 01/04/2011

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SALF	Continued From page 5 2. Observation of the electrical system on 1/03/11 between 11:30 AM and 2:30 PM showed the radio in resident room #103 was plugged into an extension cord. The lamp in resident room #123 was plugged into a 2-way adapter. The clock in the resident room #126 was plugged into an extension cord. At 11:35 AM the maintenance manager reported the electrical system was inspected monthly to ensure temporary wiring was not used. He did not know why the adapters had not been removed. Reference: 22-2.5.11 Utilities. Utilities shall comply with provisions of Section 7-1. 7-1.2 Electrical wiring and equipment installed shall be in accordance with NFPA 70, National Electrical Code. NFPA 70, National Electrical Code, 1993 Edition. 400-8. Uses not permitted. Unless specifically permitted in section 400-7, flexible cords and cables shall not be used for the following: (1) As a substitute for the fixed wiring of a structure; (4) Where attached to building surfaces; 517-20. Wet Locations. (a) All receptacles and fixed equipment within the area of the wet location shall have ground-fault circuit-interrupter protection....	SALF		