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

PRINTED: 09/11/2013
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
	53A051	A. BUILDING 01 - MAIN BUILDING 01 B. WING	08/28/2013

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SOUTH LINCOLN NURSING CENTER	711 ONYX STREET KEMMERER, WY 83101

(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 II (000) construction built in 1998.The building was equipped with a supervised, automatic wet sprinkler system with a fire pump, an anti-freeze loop, and an addressable fire alarm system. The facility had a capacity of 24 certified Medicaid beds with a census of 20.	K 000		
K 025 SS=E	NFPA 101 LIFE SAFETY CODE STANDARD Smoke barriers are constructed to provide at least a one half hour fire resistance rating in accordance with 8.3. Smoke barriers may terminate at an atrium wall. Windows are protected by fire-rated glazing or by wired glass panels and steel frames. A minimum of two separate compartments are provided on each floor. Dampers are not required in duct penetrations of smoke barriers in fully ducted heating, ventilating, and air conditioning systems. 19.3.7.3, 19.3.7.5, 19.1.6.3, 19.1.6.4 This STANDARD is not met as evidenced by: Based on observation and staff interview, the facility failed to ensure the smoke barrier wall was smoke resistant. The findings were:	K 025	South Lincoln Nursing Center will ensure that building construction is maintained to ensure the smoke barrier wall is smoke resistant as required. 1. The three unsealed penetrations above the activities room will be sealed. 9/20/13 2. The 4 inch by 12 inch penetration around the smoke damper on the southwest corner of the kitchen will be sealed. 9/20/13 3. The Director of Plant Operations will develop a quality monitoring tool to ensure that the required building construction is maintained to ensure the smoke barrier wall is smoke resistant. The results of the monitoring tool will be reported at the monthly QA/QI meeting until substantial compliance is met. 10/8/13	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE
Eric Boley E B Digitally signed by Eric Boley, cn=Eric Boley, o=South Lincoln Medical Center, ou=CEO, email=eboley@southlincolnmedical.com, c=US Date: 2013.09.19 16:57:05 -06'00'

TITLE: CEO

(X6) DATE: September 19, 2013

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.

FOR ACCEPTED ON 9/20/13 W/ ERIC BOLEY, CEO.

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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9/24/13

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K 025	Continued From page 1 Observation of the smoke barrier wall on 8/28/13 at 9:04 AM showed there were three unsealed penetrations above the activaties room. The largest gap measured 8 inches by 10 inches. Further observation on 8/28/13 at 9:07 AM showed a 4 inch by 12 inch penetration around the smoke damper on the southwest corner of the kitchen. At the time of the observation, maintenance technician #1 could not explain why the aforementioned holes had not been noticed and repaired during the annual safety inspection.	K 025		
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 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 ensure 1 of 7 fire alarm system components was tested. The findings were: Review of the fire alarm system testing records showed the smoke dampers were not tested during the 10/27/12 annual test. On 8/28/13 at 11:10 AM the plant operations superintendent confirmed the smoke dampers have not been	K 052	South Lincoln Nursing Center will ensure the fire alarm system required for life safety is tested and maintained in accordance with NFPA 70 National Electrical Code and NFPA 72. 1. The smoke dampers will be tested on a yearly basis. 2. The smoke dampers will be tested on 9/20/13. 3. The Director of Plant Operations will develop a quality monitoring to ensure that the fire dampers are tested on a yearly basis. The results of the quality monitoring tool will be reported at the monthly QA/QI meeting until substantial compliance is met.	9/20/13 10/8/13

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K 052	Continued From page 2 tested in the past year. He could not show the last time the dampers were tested. Reference NFPA 101, 2000 Edition, 19.3.4.1, 9.6.1.4, NFPA 72, 1999 Edition; Table 7-3.2 Testing Frequencies. 15. Initiating Devices a. Duct Detectors, ... annually b. Electromechanical Releasing Device (Smoke Dampers), ... annually	K 052		
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 equipment had adequate work space in 1 of 2 smoke compartments and failed to ensure temporary electrical wiring did not replace permanent fixed wiring in 1 of 2 smoke compartments. The findings were: 1. Observation of the generator room on 8/27/13 at 3:36 PM showed maintenance equipment and boxes were being stored in front of four electrical panels. At the time of the observation, maintenance technician #1 could not explain why the equipment and boxes had not been moved during the monthly safety inspections of the area. 2. Observation of resident room #101 on 8/28/13 at 9:21 AM showed the radio was plugged into an extension cord. At the time of the observation, maintenance technician #1 could not explain why	K 147	South Lincoln Nursing Center will ensure the electrical wiring and equipment is in accordance with NFPA 70, National Electrical Code 9.1.2. 1. The maintenance equipment and boxes that were stored in front of the four electrical will be removed. 9/20/13 2. The extension cord in room 101 will be removed. 9/20/13 3. The Director of Plant Operations will develop a quality monitoring tool to ensure that electrical panels are not encumbered by storage and that extension cords are not used in the facility. The results of the quality monitoring tool will be reported at the monthly QA/QI meeting until compliance is met. 10/8/13	

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K 147	Continued From page 3 the extension cord had not been noticed and removed during the quarterly resident room safety inspection. Reference NFPA 101, 2000 Edition, 18.5.1.1, 9.1.2, NFPA 70, 1999 Edition; 110-26. Spaces About Electrical Equipment. Sufficient access and working space shall be provided and maintained about all electrical equipment to permit ready and safe operation and maintenance of such equipment ... (a) Working Space. Working space for equipment operating at 600 volts, nominal, or less to ground and likely to require examination, adjustment, servicing, or maintenance while energized shall comply with the dimensions of (1), (2), and (3) or as required or permitted elsewhere in this Code. (1) Depth of Working Space. The depth of the working space in the direction of access to live parts shall not be less than indicated in table 110-26(a) ... Table 110-26(a) Nominal Voltage To Ground — Minimum Clear Distance (ft) 0/150 — 3 ft. (b) Clear Space. Working space required by this section shall not be used for storage ... 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 (2) Where run through holes in walls ... (3) Where run through doorways, windows, or similar openings (4) Where attached to building surfaces	K 147		

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