Wyoming Dept of Health - Office of Healthcare Licensi

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	WY0018	A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	03/30/2009

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MOUNTAIN TOWERS HEALTHCARE	3128 BOXELDER 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
S 000	State Rules and Regulations Wyoming Department of Health Chapter 19 Rules and Regulations for Licensure of Nursing Care Facilities Section 7. Construction/Remodeling. Department of Health Chapter III, Construction Rules for Health Facilities apply. Chapter 3 Construction Rules and Regulations for Healthcare Facilities Section 2. Applicability. (a) These rules shall apply to and govern the construction, remodel, or expansion of healthcare facilities, on and after the effective date of these rules. Chapter 11 Rules and Regulations for Program Administration of Nursing Care Facilities Section 7. Housekeeping, Laundry, and Maintenance Services. (a) Housekeeping and Maintenance Services. Sufficient numbers of adequately trained housekeeping and maintenance personnel shall be available to maintain the interior and exterior of the facility in a safe, clean, orderly and attractive manner. (ii) The facility shall be free from offensive odors, accumulations of dirt, rubbish, and dust. Section 5. Organization and Administration. (a) Governing Body. The Nursing Care Facility shall have a governing body which has the legal authority and responsibility to operate the Nursing Care Facility. The governing body shall: (iv) Written policies shall ensure a safe and sanitary environment for residents and personnel.	S 000	**State Tag: S000** **A. Corrective Action** Upon completion of the construction on 03/25/09, the sawdust and debris were removed from the resident care area. **B. Identification of Other Residents Having the Potential to be Affected** The Maintenance Director will monitor other contractors who may conduct work in the future to determine if they are appropriately using protective barriers as necessary for the containment of construction dust and debris. Immediate action will be taken if requirements are not met. **C. Measures/Systemic Changes** The Maintenance Director will educate contractors at the time work is to be performed to utilize barriers that will prevent sawdust and debris in resident care areas. The ED will in-service the Maintenance Director on the requirements of Chapter 3, Construction Rules and Regulations for Healthcare Facilities, by 05/11/09. **D. Monitoring Corrective Action** Findings of the audits will be reported to the Performance Improvement Committee for review, recommendations and direction as needed. Date of compliance is May 11, 2009.	

Wyoming Dept of Health, Office of Healthcare Licensing and Surveys

DE J Stucko — Executive Director — 4-20-09

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

STATE FORM 6899 — RECEIVED Wyoming Dept of Health — PMLY21 — If continuation sheet 1 of 3

POC accepted w/ DAN Stuckland on 4/24/09, signed copy delivered 4/27/09.

Delivered APR 27 2009

Office of Healthcare Licensing and Surveys

* Delivered on 4-20-09 But did not sign this copy. Signed it on 4-25-09 *

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S 000	Continued From page 1 This regulation is NOT met as evidenced by: Based on observation and staff interview, the facility failed to ensure construction project plans and an infection control risk assessment were submitted as required for plan approval prior to commencing construction. A project involving electrical alterations was noted to be in progress at the time of the survey. The findings were: 1. Observation on 3/25/09 at 10 AM revealed a construction project was underway at the third floor nurses' station. Five residents were noted to be in the dining area next to the nursing station. Intermittent observations throughout the day showed sawdust accumulated on the desk at the nurses' station and on the countertop above the desk. Observation also showed a nurse preparing medications for administration to residents at the medication cart, which was located directly next to the counter that was contaminated with sawdust and debris. At 10:30 AM the smell of sawdust was evident. At 10:45 AM, five ceiling panels were removed, which caused dust and debris to fall into the nurses' station area and contaminate the medication cart. Observation revealed there was no protective barrier around the construction site. 2. Observation on 3/25/09 at 10:10 AM revealed two-inch square poles/conduits had been added to the second floor nurses' station. Interview with the maintenance director at that time revealed poles were being added to supply power at both the second and third floor nursing stations. The maintenance director further commented that the facility did not have plan approval from the Wyoming Department of Health for the project. He stated he was unaware that electrical alterations required any type of approval or	S 000		

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S 000	Continued From page 2 inspection. 3. Observation on 3/26/09 at 9:25 AM showed two contractors working in the ceiling above the second floor nurses' station. At the time of the observation, two staff members were at the nurses' station and several residents were in the adjacent hallway and in the dining area across from the nurses' station. Debris from the ceiling area was observed to fall on the nursing station, as well as on a medication cart parked next to the station. 4. Interview on 3/26/09 at 10 AM with the infection control coordinator revealed remodeling and construction projects were usually monitored by the infection control coordinator to ensure effective infection control measures were implemented, but she had not been told about the project and had not provided any input or infection control monitoring for this project.	S 000		