PRINTED: 06/27/2013
FORM APPROVED

Healthcare Licensing and Surveys

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	WY0008	A. BUILDING: _____ B. WING _____	06/13/2013

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WORLAND HEALTHCARE AND REHABILITATK	1901 HOWELL AVENUE WORLAND, WY 82401

(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
SNH	LIC REGS FOR NURSING HOMES Wyoming Department of Health Aging Division Rules and Regulations for Program Administration of Nursing Care Facilities, Chapter 11. Section 6. Physical Environment. (a) The building(s) of the Nursing Care Facility shall be constructed, arranged and maintained to ensure the health and welfare of all residents. (iv) Shower/bath and resident lavatories shall be set to provide water of a temperature not to exceed 110 degrees Fahrenheit. This State regulation was not met as evidenced by: Based on observation, water temperature log review, and staff interview, the facility failed to ensure resident water temperatures did not exceed 110 degrees F (Fahrenheit). The findings were: During an observation of the building on 6/13/13 at 7:30 AM, the following water temperatures in resident areas were taken by the surveyor and found to be in excess of 110 degrees F: room #102 was 116 degrees F, room #103 was 114 degrees F, and room #104 was 114 degrees F. Review of the facility water temperature logs randomly tested for 6/4/13 and 6/12/13 revealed the following: On 6/4/13 17 resident rooms were tested, and they all tested between 111.8 degrees F and 118.1 degrees F. On 6/12/13 16 resident rooms were tested, and they all tested between 111.4 degrees F and 117.5 degrees. On 6/13/13 at 8:50 AM, the maintenance director took the	SNH	Preparation and execution of this plan of correction does not constitute an admission or agreement by this provides of the truth of the facts alleged or conclusions set forth in statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of federal and state law. Completion dates are provided for procedural processing purposed and correlate with the most recently contemplated or accomplished corrective action and do not necessarily correspond chronologically to date the facility is of the opinion it was in compliance with requirements of participation or that corrective action was necessary. SNH The facility will ensure resident water temperatures do no exceed 110 degrees F (Fahrenheit). This will be accomplished by: Water temperatures will be recorded each week. If at anytime water temperatures recorded are found to be in excess of 110 degrees F (Fahrenheit) the Maintenance Supervisor will adjust the necessary components and the temperature recorded will be re-checked within 24 hours and documented on the recording form.	

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

STATE FORM 6899 80HH11 If continuation sheet 1 of 2

Change to POC made via phone call with DeGrazia, Administrator on 7/11/13 @ 3pm. POC accepted. Janelle Cole, OTR/L

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SNH	Continued From page 1 following water temperatures: room #102 was 117 degrees F and room #103 was 116 degrees. At that time, an interview with the maintenance director showed he was unaware of the state regulation requiring resident water temperatures not to exceed 110 degrees F.	SNH	Monitoring. Maintenance Supervisor will monitor weekly. Any issues notes will be addressed immediately. Quality Assurance: Director of Maintenance will report results of monitoring quarterly or more frequently as needed at the Quality Assurance meeting for review and suggestions.	8/1/13