PRINTED: 02/04/2015
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
	ALF009	A. BUILDING _____ B. WING _____	C 01/22/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EMERITUS CORP DBA/EMERITUS AT ABSARC	2401 COUGAR AVENUE CODY, WY 82414

(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	Opening Comments Rules and Regulations utilized for this survey are: Rules and Regulations for Program Administration of Assisted Living Facilities, Chapter 12, effective 12/12/2007 Rules and Regulations for Licensure of Assisted Living Facilities, Chapter 4, effective 06/28/2001 A complaint survey was conducted by Healthcare Licensing and Surveys on 1/21/15 and 1/22/15. The survey was prompted by complaint intake # LIC-14-001.	S 000		
S5091	Ch 12 Sec 7 (n)(ii)(A-AA) Assisted Living Facility (ALF) Core Services (n) Furnishings, Buildings, Physical Plant. (ii) Sleeping rooms shall be homelike, well lighted, ventilated and equipped in compliance with the requirements below: (A) All windows shall have drapes, curtains, shades or blinds to assurance privacy; (B) Beds (if provided by the facility) shall be at least standard size in width (39"), and shall be equipped with comfortable, clean mattresses and pillows. Mattresses shall be professionally renovated or replaced as needed. Extra long beds shall be used to accommodate tall residents. Rollaway-type beds, cots, and folding beds shall not be used unless the resident brings these items from home for personal use; (I) Two residents may, by consent of both parties; or by approval of the appropriate responsible party, be permitted to use one bed no smaller than double size, and occupy a	S5091		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Kelly Van Deer TITLE: Executive Director (X6) DATE: 2-20-15

STATE FORM 6899 2YPP11 If continuation sheet 1 of 6

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WY Dept of Health
MAR 02 2015
Healthcare Licensing and Surveys

POC accepted 3/2/15 @ 1pm.
Call to Kelly Van Deer. DOC 2/28/15.
JL RN

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S5091	Continued From page 1 single-bed sleeping room. (C) Cabinet or bedside table; (D) Non-combustible wastebasket; (E) Chair; and (F) If common closets are utilized by two (2) or more residents, dividers shall be provided for separation of each resident's clothing. All closets shall be equipped with doors. Free-standing closets shall be deducted from the square footage in the sleeping room. (G) The size and arrangement of the residents' beds, furnishings, possessions or equipment shall allow the resident to gain fire emergency access to windows and doors, and access to toilet room. Multiple-bed rooms shall have at least three (3) feet between beds. (H) Residents shall be encouraged to bring personal items and furniture to their rooms, (e.g., beds, chairs, and pictures); (I) There shall be at least one (1) bedside screen per double room available to provide resident privacy when needed; (J) There shall be an adequate supply of hot and cold water available at each lavatory, bathtub/shower, kitchen sink, dishwasher, and laundry equipment. Hot water for bathing, and resident handwashing, and laundry should be no hotter than one hundred and twenty (120°) degrees Fahrenheit. (K) All plumbing shall be maintained in good repair and according to the requirements of	S5091		

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S5091	Continued From page 2	S5091		

the Uniform Plumbing Code;

(I) Private water systems shall be safe, potable, and have an adequate supply. Testing shall be done monthly and records of tests shall be retained at the facility.

(II) Private water systems shall be tested and found safe and potable before Licensure is granted.

(L) Fireplaces shall be securely screened and glassed in;

(M) The facility shall be maintained so that it is free of hazards, such as loose or broken window glass, loose or cracked floors or floor coverings, or cracked or loose plaster on wall or ceilings;

(N) At least one primary grade level entrance to the building shall be freely accessible for wheelchairs;

(O) Each resident shall have his individual comb, toothbrush, towels, and wash cloths;

(P) Clean drinking glasses shall be available for the residents. Common drinking cups are prohibited;

(Q) Bathrooms shall have soap and toilet paper. The facility shall provide paper towels or a blow dryer for hands, or rack space adequate for each resident using the bathroom to hang his/her personal towel. Use of a common towel is prohibited.

(R) Provisions shall be made for privacy in all bath and toilet rooms;

(S) Automatic deodorizers or aerosol fresheners shall not be used except in bathrooms; and

(T) Residents shall not use a common bar of soap. The facility shall provide either soap dispensers or individual bars of soap for each resident.

(U) Housekeeping.

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S5091	Continued From page 3	S5091		

(I) Housekeeping practices and procedures shall be employed to keep the home free from offensive odors, accumulations of dirt, and dust.

(II) Floors shall be maintained and clean

(III) Polish of floors shall provide a non-slip finish.

(IV) Throw or scatter rugs shall not be used. Non-slip mats may be used.

(V) Covered containers with tight lids shall be used for garbage storage.

(W) The facility shall be maintained free of insects and rodents. All windows shall be screened. All exit doors opening inward shall have a screen door.

(X) Linens and laundry.

(I) Laundry service for linen and residents' personal clothing shall be provided. The manager shall take measures to ensure that residents' clothing is not lost or misplaced while laundering.

(II) All linen shall be bagged or placed in a hamper before being transported to the laundry area.

(III) Bed linen shall be changed as necessary but at least weekly. Additional blankets or pillows shall be provided. Rubber or water protective sheets shall be used if indicated.

(IV) Two (2) complete changes of clean bed linen shall be on hand for each licensed bed.

(1.) Torn, worn, or unclean bed linen shall not be used.

(V) All bleaches, detergents, disinfectants, and other cleaning agents shall be separated from medicines and foods

(VI) Soiled linen shall not be transported through, sorted, processed, or stored, in kitchens, food preparation areas, or food

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S5091	Continued From page 4 storage areas. (Y) The heating system shall be inspected yearly, before the heating season, and maintained according to manufacturer's instructions. (Z) Portable space heaters shall not be used (e.g. electric or kerosene) (AA) Equipment Maintenance and Testing. (I) The devices, equipment, systems, conditions, arrangements, levels of protection, or any other features that are required for compliance with the provisions of the Life Safety Code shall be permanently maintained for the building housing the facility. This State Rule and Regulation is not met as evidenced by: Based on observation, staff interview and policy review, the facility failed to ensure oxygen tanks were maintained in a safe manner during three random observations, which affected residents #3 and #30. The findings were: Observation on 1/22/15 at 12:20 PM showed resident #30 sitting in the dining room, with an unsecured oxygen cylinder on the floor next to him/her. Interview at that time with licensed practical nurse (LPN) #1 showed the unsecured oxygen cylinder "wasn't supposed to be there", and should be in the appropriate container. Observation that same day at 12:25 PM showed the resident had 14 unsecured oxygen cylinders in his/her room. Interview at that time with the administrator and the director of clinical services (DCS) verified the unsecured oxygen cylinders should be in a container for safety. Observation on 1/22/15 at 12:30 PM showed resident #3 had	S5091	A) Oxygen tanks in rooms #3 and #30 will be secured in containers for safety. Oxygen in dining room will be appropriately stored on walkers for safety. All oxygen tanks in facility will be secured per facility policy on Gas Tanks / Compressed Gas Cylinders guidelines for safe handling. In-service and monitoring tools will be implemented. B) Any unnecessary oxygen tanks in room #3 and #30 have been picked up by Healthcare providers and all oxygen tanks in facility are being safely stored in containers.	

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S5091	Continued From page 5 one unsecured oxygen cylinder in his/her room. Interview at that time with the administrator and the DCS verified the unsecured oxygen cylinder should be in a container for safety. Review of the facility policy titled "Gas Tanks/Compressed Gas Cylinders...Guidelines for Safe Handling" dated 10/12 showed "...Cylinders should be provided with chaining, strapping or stands to prevent tipping exposure..." According to National Fire Protection Association (NFPA) 99 (2002 edition): 9.4.2(G) and 5.3.13.2.3 Cylinders in service and in storage shall be individually secured and located to prevent falling or being knocked over.	S5091	C) Executive Director and Health and Wellness Director completed in-service and provided all staff an education on facility policy on Gas Tanks / Compressed Gas Cylinders Guidelines for safe handling in all areas of facility. Health and Wellness Nurse contacted Oxygen providers to remove unnecessary tanks and reeducate on facility policy for compliance on securing and storing oxygen tanks. Health and Wellness Director will add to daily task lists for Resident Assistants to initial that oxygen tanks are secured for any resident using oxygen. Housekeeper weekly checklist will include an additional check during weekly cleaning of room. D) Oxygen policy will be reviewed for compliance by QA team meeting monthly. E) **Date of Completion:** February 28, 2015	

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3/2/15