

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

PRINTED: 02/13/2015
FORM APPROVED
OMB NO. 0938-0391

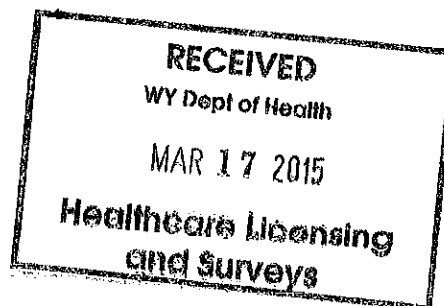
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 535021	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 01/28/2015
NAME OF PROVIDER OR SUPPLIER WYOMING RETIREMENT CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 890 US HWY 20 SOUTH BASIN, WY 82410	
(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 with a basement built in 1981. The building was equipped with a supervised automatic wet sprinkler system with an anti-freeze loop and an addressable fire alarm system. The facility had a capacity of 90 certified Medicare and Medicaid beds with a census of 71.	K 000		
K 076 SS=D	NFPA 101 LIFE SAFETY CODE STANDARD Medical gas storage and administration areas are protected in accordance with NFPA 99, Standards for Health Care Facilities. (a) Oxygen storage locations of greater than 3,000 cu.ft. are enclosed by a one-hour separation. (b) Locations for supply systems of greater than 3,000 cu.ft. are vented to the outside. NFPA 99 4.3.1.1.2, 19.3.2.4 This STANDARD is not met as evidenced by: Based on observation and staff interview, the facility failed to provide an adequate medical gas storage area per NFPA 99. The finding were:	K 076	It is the policy of the Wyoming Retirement Center to have adequate space for medical gas storage tanks and to have door closers installed on the medical gas storage areas. The appropriate number of H and E tanks are in the medical gas storage space to accommodate the 3000 cubic feet requirement. A door closer has been installed to ensure the door closes in a timely manner. Installation was completed on 2/19/15. Signs have been posted in the medical gas storage rooms indicating how many H and E tanks are allowed in the space. Signs were posted on 2/19/15. Maintenance personnel will be educated on the number of H and E tanks that are allowed in the medical gas storage rooms. Environmental Services will monitor compliance	3/15/15

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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.



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K 076	Continued From page 1	K 076	and report data to the Quality Assurance (QA) committee.		
K 141 SS=D	Observation of the Oxygen Storage Room on 01/28/15 at 9:53 AM revealed 5 H tanks and approximately 20 E tanks. The amount of oxygen stored within the room exceeded 3000 cubic feet. No door closer was provided to the Oxygen Storage Room. At the time of the observation, the Facility Maintenance Manager acknowledged the door did not have a closure. Ref: 2000 NFPA 101, Section 19.3.2.4 1999 NFPA 99, Sections 8-3.1.11.1 and 4-3.1.1.2 NFPA 101 LIFE SAFETY CODE STANDARD Non-smoking and no smoking signs in areas where oxygen is used or stored are in accordance with 19.3.2.4, NFPA 99, 8.6.4.2. This STANDARD is not met as evidenced by: Based on observation and staff interview, the facility failed to provide and adequate medical gas storage sign per NFPA 99. The findings were: Observation of the Oxygen Storage Room on 01/28/15 at 9:53 AM revealed signage posted on the outside of the door did not included the minimum wording per NFPA 99. Ref: 2000 NFPA 101, Section 19.3.2.4 1999 NFPA 99, Section 8-31.11.3 NFPA 101 LIFE SAFETY CODE STANDARD Electrical wiring and equipment is in accordance with NFPA 70, National Electrical Code. 9.1.2	K 141	It is the policy of the Wyoming Retirement Center to post the adequate medical gas storage sign per NFPA 99. A sign was posted that is in accordance with the NFPA 99, "Caution Oxidizing Gas Stored Within No Smoking". The Environmental Services will perform quarterly checks for the appropriate signs on the medical gas storage rooms for compliance with the NFPA 99. Environmental Services will provide documentation to the QA committee to review. Reporting will be completed as determined by the QA committee.	3/15/15	
K 147 SS=D		K 147			

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K 147	Continued From page 2 This STANDARD is not met as evidenced by: Based on observation and staff interview, the facility failed to ensure that electrical wiring was in accordance to NFPA 70. The findings were: Observation of resident room #203 on 01/28/15 at 10:01 AM revealed an extension cord plugged in to Christmas lights. At the time of the observation, the Facility Maintenance Manager acknowledged the extension cord being used. Ref: 2000 NFPA 101, Sections 19.5.1 and 9.1.2 1999 NFPA 70, Article 305	K 147	It is the policy of the Wyoming Retirement Center to have electrical wiring that is in accordance with NFPA 70. The extension cord in room #203 was removed on 1/29/15. The facility currently does monthly searches of the facility to remove extension cords not in compliance with NFPA 70. The facility has purchased multi-plug surge protectors that are NFPA 70 approved. The Environmental Services Manager, or designee, will do monthly room checks to ensure that only NFPA 70 multi-plug surge protectors are used. If any rooms need the multi-plug surge protector, the surge protector will have "surge" written on it. Environmental Services will monitor monthly until determined to be in compliance. Environmental Services will provide documentation of compliance with NFPA 70 to the QA committee. Reporting will be complete as determined by QA committee as compliance is demonstrated.		