

PRINTED: 09/21/2015
FORM APPROVED

Healthcare Licensing and Surveys

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ALF008	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED C 09/08/2015
NAME OF PROVIDER OR SUPPLIER SIERRA HILLS ASSISTED LIVING COMMUNITY			STREET ADDRESS, CITY, STATE, ZIP CODE 4806 NORTH COLLEGE DRIVE CHEYENNE, WY 82009		
(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	General Comments A Life Safety Code complaint investigation was conducted at your facility on September 09, 2015 by the office of Healthcare Licensing and Surveys. (HLS) The facility was a two story fully sprinkled building of Type V (111) construction built in 1997. The building was equipped with a supervised automatic wet sprinkler system and an addressable fire alarm system. The facility had a capacity of 100 licensed beds and a total census of 74 residents. Wyoming Department of Health, Rules and Regulations for Licensure of Assisted Living Facilities Chapter 4, Section 10 Life Safety and Electrical Safety. The requirements in the Department of Health Chapter III, Construction Rules for Health Facilities apply. (ii) Assisted Living Facilities operation prior to the effective date of these rules, shall meet the Life Safety Code of the National Fire Protection Association that was in effect at the time the facility was licensed as an Assisted Living Facility. All references are based on the requirements of NFPA 101 Life Safety Code, New Board and Care, 1994 Edition, unless otherwise noted.	S 000			
S8027	NFPA Life Safety - Nfpa Emergency Egress & Rel Dr NFPA 101 Emergency Egress and Relocation Drills This State Rule and Regulation is not met as evidenced by: Based on observation, and resident interviews, the facility failed to conduct fire drills meeting the	S8027			

Wyoming Dept of Health, Aging Division, Healthcare Licensing and Surveys
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

RECEIVED

WY Dept of Health

OCT 01 2015

Healthcare Licensing
and Surveys

EXECUTIVE DIRECTOR

10-1-15

MKBVJ1

If continuation sheet 1 of 3

Noted POC Accepted via phone with
Mike Quintal Administrator on 10/7/15 at
11:40 am

[Signature]

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S8027	Continued From page 1 licensure requirements. The findings were: 1. An entry interview was conducted with the Facility Administrator on 09/08/15 at 4:10 PM. The administrator was informed that this survey was to investigate a life safety code complaint. Interview with the administrator at that time revealed that fire drills consisted of full evacuation. 2. Interview with resident #1 was conducted on 09/08/15 at 4:15 PM. Resident #1 resided on Level 2 and stated that they could not evacuate without the use of the elevator. Resident #1 stated they are generally notified before a fire drill, so they can utilize the elevator to go down stairs prior to the alarm being pulled. 3. Interview with resident #2 was conducted on 09/08/15 at 4:20 PM. Resident #2 resided on Level 2 and stated that he is notified prior to the fire drills so he can utilize the elevator to go down stairs prior to the alarm being pulled. Resident #2 also indicated that he cannot walk, and cannot evacuate without the use of the elevator. 4. The facility initiated the fire alarm system from a pull station adjacent to the facility elevator at 4:26 PM on 09/08/15. The location of the alarm activation disabled the use of the elevator throughout the drill. The following observations were made on Level 2 during the drill. A total of 13 Residents were awaiting assistance or the use of the elevator. A total of (6) residents were awaiting assistance at the top of the stairs. Five of these residents were ambulatory and (1) was in a wheel chair. Two staff members were observed giving significant assistance to each resident down the stairs. Seven residents were located in front of the disabled elevator. Four	S8027	Resident #1 will be issued a letter from the Executive Director by 10/08. The letter will state that the resident will have to relocate to the 1st floor within 30 days to be in compliance with the State of Wyoming rules and regulations for assisted living facilities. Resident #2 will be issued a letter from the Executive Director by 10/08. The letter will state that the resident will have to relocate to the 1st floor within 30 days to be in compliance with the State of Wyoming rules and regulations for assisted living facilities. Administrator and Clinical Services Director will identify all residents who prove to be unable to evacuate the 2nd floor by the way of the stairs. If resident is unable to properly evacuate by the stairs, Administrator will issue resident a 30 day letter. The letter will state the resident will have to relocate downstairs or to another facility if Sierra Hills can not accommodate the resident on the 1st floor.	11/8/15 11/8/15 11/8/15	

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NAME OF PROVIDER OR SUPPLIER SIERRA HILLS ASSISTED LIVING COMMUNITY		STREET ADDRESS, CITY, STATE, ZIP CODE 4808 NORTH COLLEGE DRIVE CHEYENNE, WY 82008		
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S8027	Continued From page 2 residents in wheel chairs, and (3) residents standing. At the time of the observation the residents were agitated that the elevator did not work, and stated they could not evacuate with out the use of the elevator. 5. Drill terminated at 4:33 PM on 09/08/15 with (12) residents still on Level 2.	S8027	Administrator and CSD will identify residents that are unable to evacuate the 2nd floor with minimal assistance by conducting an assessment for each individual resident and observe the resident is able to walk down the stairs in order to evacuate the building, recording the results in residents care plan. At 2 different times in November 2015 an unannounced fire drill will be conducted to ensure that all residents are in compliance with the State of Wyoming rules and regulations for assisted living facilities.	12/1/15 11/8/15