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
	WY0036	A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	03/10/2009

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WESTWARD HEIGHTS CARE CENTER	150 CARING WAY LANDER, WY 82520

(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 Aging Division Rules and Regulaitons for Licensure of Nursing Care Facilities Chapter 19 Section 6. Disaster Plan. (a) All Nursing Care Facilities shall develop and adopt a written disaster preparedness plan in accordance with the Chapter 11, " Health Care Emergency Preparedness " , of NFPA 99, Standard for Health Care Facilities. This standard is NOT met as evidence by: Based on record review and staff interview the facility failed to ensure two of twelve emergency preparedness policies were organized in a usable and functional way. The findings were: 1. Review of the Building Evacuation policy revealed the relocation site for residents was Showboat Assisted Living Center. Interview with the maintenance director on 3/10/09 at 10:15 PM revealed this was no longer the current and the actual relocation site was the Wyoming Life Resource Center. 2. Review of the the entire disaster manual revealed it was difficult to navigate as non-contiguous pages were inserted between corresponding numbered pages. Pages 60 and above were referenced by several policies but were unable to be located until staff members spent several minutes locating them. The pages were located in a different section of the manual and separated by an unmarked divider.	S 000	**Chapter 19** The Maintenance Supervisor will oversee the rewriting of the building evacuation plan to include current information of evacuation site. A Quality Assurance task force headed by the Maintenance Supervisor will review and rewrite all sections of the emergency preparedness manual to include current information and to simplify the format and page numbering. The Safety Committee will review and approve any addition or corrections to the Emergency preparedness Manual (if any) on a monthly basis. The Quality Assurance Committee will review, modify and/or approve the Emergency Preparedness Manual annually. Date of Correction: ~~May 15, 2009~~ 4/29/09	

POC accepted w/ Donna Schultz, NHA on 4/01/09

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S 000	Continued From page 1 3. Interview with the administrator on 3/10/09 at 10:30 AM revealed the manual was last reviewed on 12/08/08. She further confirmed the manual was difficult to navigate.	S 000		