PRINTED: 02/03/2015
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
	ALF021	A. BUILDING: _____ B. WING _____	01/27/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WYOMING PIONEER HOME	141 PIONEER HOME DRIVE THERMOPOLIS, WY 82443

(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	S 000		
	A Life Safety Code survey was conducted at your facility on January 27, 2015 by the office of Healthcare Licensing and Surveys. (HLS) The facility was a single story building with a basement, fully sprinkled, and of Type V (111) construction built in 2009, 2011, and 2012. The facility was divided by 2-hour rated fire barrier walls into 14 smoke compartments. The building was equipped with a supervised automatic wet sprinkler system with an addressable fire alarm system. The facility had a capacity of 64 licensed beds with a census of 44 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 2006 Edition, unless otherwise noted.			
S8008	NFPA Life Safety - Nfpa Arrange of Means of Egress NFPA 101 Arrangement of Means of Egress This State Rule and Regulation is not met as evidenced by:	S8008	1. The Wyoming Pioneer Home has removed all chairs from the Nurse Lane corridor. The Director of Nursing will ensure that chairs are removed at all times from the Nurse Lane corridor. The Nursing Director will report to QA team and Administrator Quarterly.	2/2/15

Wyoming Dept of Health, Aging Division, Healthcare Licensing and Surveys
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE: Facility Manager — (X6) DATE: 2-9-15

STATE FORM 6899 1FS711 If continuation sheet 1 of 4

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WY Dept of Health
FEB 09 2015
Healthcare Licensing and Surveys

POC Accepted VIA Phone Call with Administrator Sharon Skiver on 2-10-15 at 3:35pm S 34354

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S8008	Continued From page 1 Based on observation and staff interview, the facility failed to ensure that exits were readily accessible at all times. The findings were: Observation of the Nurse's Lane corridor on 01/27/15 at 10:03 AM revealed chairs placed in the corridor for residents during medication administration. Interview with staff at the time of the observation revealed that medication administration did not take place for another two hours. It was also observed at the end of the hallway a chair had been place in front of the exit doors for residents while removing their shoes when returning from the outside. At the time of the observations, the Facility Administrator acknowledge the chairs in the corridor and in front of the exit. Ref: 2006 NFPA 101, Sections 32.3.2.5.1 and 7.5.1.1	S8008	(Continued from page 1) 2. The Wyoming Pioneer Home has removed the chair from the end of the hall on Nurse Lane. The Director of Nursing will ensure the chair is always removed from the end of the hall on Nurse Lane. The Nurse Manager will report to QA team and Administrator Quarterly.	2/2/15
S8013	NFPA Life Safety - Nfpa Marking of Means of Egress NFPA 101 Marking of Means of Egress This State Rule and Regulation is not met as evidenced by: Based on observation and staff interview, the facility failed to mark access to exits in 1 of 14 smoke compartments. The findings were: Observation of the two stairwells in the basement on 01/27/15 at 9:43 AM revealed the stairwells leading to exit discharges were not readily apparent to the occupants. The basement stairs were not provided with approved, readily visible	S8013	1. The Wyoming Pioneer Home now has approved readily visible signs to notify occupants of a way to reach the exits above the 2 stairwells in the basement. The Maintenance Supervisor will ensure that the basement has exit signs that are readily available to notify occupants at all times. The Maintenance Supervisor will report to QA team and Administrator Quarterly.	2/9/15

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S8013	Continued From page 2	S8013		
	signs to notify occupants of a way to reach an exit. At the time of the observation, the Facility Administrator and Facility Maintenance Manager acknowledge the lack of exit signs in the basement. Ref: 2006 NFPA 101, Sections 32.3.2.10 and 7.10.1.5.1			
S8030	NFPA Life Safety - Nfpa Miscellaneous NFPA 101 Miscellaneous This State Rule and Regulation is not met as evidenced by: Based on observation and staff interview, the facility failed to store medical oxygen cylinders separated from combustible or incompatible materials and failed to provide the appropriate signage per NFPA 99. The findings were: Observation of the Oxygen Storage Room on 01/27/15 at 10:07 AM revealed that signage placed on the outside of the door was not provided with the minimum wording per NFPA 99. Additional observation inside the Oxygen Storage Room revealed cardboard boxes and plastic being stored on a metal wire shelf. At the time of the observation, the Facility Administrator and the Facility Maintenance Manager acknowledge the signage on the door and the combustible material inside the room. Ref: 2005 NFPA 99, Sections 9.4.1, 5.1.3.3.2, and 9.4.4	S8030	1. The Wyoming Pioneer Home will mount a code compliance sign on the Oxygen Storage Room door. The Maintenance Supervisor will ensure that there is always signage for the Oxygen Storage Room. The Maintenance Supervisor will report to QA team and Administrator Quarterly. 2. The Wyoming Pioneer Home will remove all combustible materials and incompatible materials from the Oxygen Storage Room and keep the Oxygen Storage Room free from any combustible material.	3/27/15 3/27/15

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S8032	Continued From page 3	S8032	(Continued from page 3)	
S8032	IPC Life Safety - Int'l Plumbing Cod This State Rule and Regulation is not met as evidenced by: Based on observation and staff interview, the facility failed to provide plumbing per the International Plumbing Code. The findings were: Observation of the emergency eyewash station located in the Nurse's Lane Spa on 01/27/15 from 10:19 AM revealed that tepid water was not provided to the eyewash via an ASSE 1071 - Performance Requirements for Temperature Actuated Mixing Valves for Plumbed Emergency Equipment - mixing valve in compliance with ANSI Z358.1 - Standard for Emergency Eye Wash and Shower Equipment. An interview with the Facility Maintenance Manager at the time of the observations confirmed that the eyewash was not provided with a tempering valve in compliance with the requirements of ANSI Z358.1. Ref: 2006 IPC, Section 411	S8032	The Nurse Manager will ensure that the Oxygen Storage Room is free from combustible or incompatible materials. The Nurse Manager will report to QA team and Administrator Quarterly. 1. The Wyoming Pioneer Home will remove the water flow eye wash station. The Wyoming Pioneer Home will purchase and install eyewash that meets ASSE 1070 and ANSI Z358.1. The Maintenance Supervisor will ensure that the eyewash station is working at all times. The Maintenance Supervisor will report to QA team and Administrator Quarterly.	3/27/15 3/27/15