

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

PRINTED: 09/13/2016
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 535046	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 08/25/2016
NAME OF PROVIDER OR SUPPLIER ST JOHN'S NURSING HOME			STREET ADDRESS, CITY, STATE, ZIP CODE 625 EAST BROADWAY JACKSON, WY 83001		
(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 Nursing Homes 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, one-story building of Type V (111) construction built in 1990. The building was equipped with a supervised automatic wet and dry sprinkler system and an addressable fire alarm system. The facility had a capacity of 60 certified Medicare and Medicaid beds with a census of 54.	K 000			
K 051 SS=E	NFPA 101 LIFE SAFETY CODE STANDARD A fire alarm system is installed with systems and components approved for the purpose in accordance with NFPA 70, National Electric Code and NFPA 72, National Fire Alarm Code to provide effective warning of fire in any part of the building. Fire alarm system wiring or other transmission paths are monitored for integrity. Initiation of the fire alarm system is by manual means and by any required sprinkler system alarm, detection device, or detection system. Manual alarm boxes are provided in the path of egress near each required exit. Manual alarm boxes in patient sleeping areas shall not be required at exits if manual alarm boxes are located at all nurse's stations. Occupant notification is provided by audible and visual signals. In critical care areas, visual alarms are sufficient. The fire alarm system transmits the alarm automatically to notify emergency forces in the event of fire. The fire alarm automatically activates required control functions. System	K 051	The facility will ensure that manual fire alarm boxes are installed in accordance with NFPA 72 in all smoke compartments. This will be accomplished by: 1. The manual fire alarm boxes located at the main entrance and at the 400 corridor and north corridor exits will be lowered to be in accordance with NFPA 72. 2. Maintenance employees will inspect all smoke compartments to ensure that the manual fire alarm boxes are installed in accordance with NFPA 72. 3. Any manual fire alarm boxes not in accordance with NFPA 72 will be installed at the correct height by a certified fire alarm company. 4. The Director of Facilities will ensure future installation of any fire alarm boxes are installed to the proper height. 5. A report of this correction will be reported at the next quarterly Living Center Performance Improvement Committee meeting scheduled for October 2016 by the NHA.	10-8-16	

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

TITLE

(X6) DATE

Patricia Weber RN MSN Administrator

9-15-16

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 051	Continued From page 1 records are maintained and readily available. 18.3.4, 19.3.4, 9.6 This STANDARD is not met as evidenced by: Based on observation and staff interview, the facility failed to install a manual fire alarm box in accordance with NFPA 72 in 4 of 5 smoke compartments. The findings were: Observation on 08/25/2016 from 08:30 AM to 11:00 AM revealed manual fire alarm boxes were installed with the operable part at 59 inches from the floor located at the main entrance and at the 400 corridor and north corridor exits, and other locations throughout the facility. Interview with the Facility Maintenance Manager at the time of observation acknowledged most if not all manual fire alarm boxes were approximately 59 inches from the floor to the operable part. Ref: 2000 NFPA 101, Sections 19.3.4 and 9.6 1999 NFPA 72, Section 2-8.1	K 051			
K 056 SS=E	NFPA 101 LIFE SAFETY CODE STANDARD Where required by section 19.1.6, Health care facilities shall be protected throughout by an approved, supervised automatic sprinkler system in accordance with section 9.7. Required sprinkler systems are equipped with water flow and tamper switches which are electrically interconnected to the building fire alarm. In Type I and II construction, alternative protection measures shall be permitted to be substituted for sprinkler protection in specific areas where State or local regulations prohibit sprinklers. 19.3.5, 19.3.5.1, NFPA 13 This STANDARD is not met as evidenced by: Based on observation and staff interview, the	K 056			

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K 056	Continued From page 2 facility failed to protect the building throughout by an approved, supervised automatic sprinkler system in 4 of 5 smoke compartments. Observation on 08/25/2016 at 8:40 AM revealed built-in closets that were located in all resident rooms, and in the rehab room. Additional observation revealed that the closets included a bar for hanging clothing, and that the top of the closet enclosure was continuous to the ceiling of the room. Further observation revealed that the closets were not provided with sprinkler protection within each closet. Interview with the Facility Maintenance Manager during the observation revealed that this condition was typical for approximately 61 closets within the facility. Further interview with the Facility Maintenance Manager was unaware of the requirement. Ref: 2000 NFPA 101, Sections 19.3.5.1 and 9.7.1.1 1999 NFPA 13, Section 1-6.1 SNC Letter 13-55 NFPA 101 LIFE SAFETY CODE STANDARD	K 056	The facility will protect the building throughout by using an approved, supervised automatic sprinkler system in all smoke compartments. This will be accomplished by: 1. The facility will provide sprinkler protection for all closets located within the facility. Maintenance employees will remove installed soffits located above the existing wardrobes ensuring proper full room sprinkler coverage. 2. The facility will provide sprinkler protection for the closet in the rehab room by installing a sprinkler head in the closet by a certified sprinkler installer. 3. The Director of Facilities will ensure all future wardrobe installations are done correctly to maintain proper sprinkler coverage. 4. A report of this correction will be reported at the next quarterly Living Center Performance Improvement Committee meeting scheduled for October 2016 by the NHA.	10-8-16	
K 062 SS=D	Required automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically. 19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5 This STANDARD is not met as evidenced by: Based on observation and staff interview, the facility failed to provide portable fire extinguishers in accordance with NFPA 10 in 1 of 5 smoke compartments. The findings were: Observation on 08/25/2016 at 10:30 AM located	K 062			

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K 062	Continued From page 3 in the maintenance office and basement employee lounge revealed fire extinguishers with the tops mounted at 69" above the floor. Interview with the Facility Maintenance Manager at the time of observation acknowledge the height of the extinguisher and was unaware of the requirement. Ref: 2000 NFPA 101, Sections 19.3.5.6 and 9.7.4.1 1998 NFPA 10, Section 1-6.10			K 062	The facility will provide portable fire extinguishers in accordance with NFPA10. This will be accomplished by: 1. The facility will lower the fire extinguishers in the maintenance office and in the basement employee lounge in be in accordance with the height specified in NFPA 10. 2. Maintenance employees will inspect the placement of all fire extinguishers with the 5 smoke compartments to ensure that they are at the correct height. 3. The Director of Facilities will ensure that any future fire extinguishers are installed at the correct height. 4. A report of this correction will be reported at the next quarterly Living Center Performance Improvement Committee meeting scheduled for October 2016 by the NHA.		10-8-16