FORM APPROVED

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ALF006	A. BUILDING: _____ B. WING _____	08/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ASPEN WIND ASSISTED LIVING COMMUNITY	4010 NORTH COLLEGE DRIVE CHEYENNE, WY 82001

(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 survey was conducted by Healthcare Licensing and Surveys on August 9, 2017. The facility was a fully sprinklered, single story building of Type V (111) construction built in 1998 and 2010. The building was equipped with a supervised automatic wet sprinkler system and an addressable fire alarm system. The facility had a capacity of 94 licensed beds with a census of 70 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. Assisted Living Facilities in 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.	S 000		
S7010	NFPA Life Safety - Nfpa Discharge from Exits NFPA 101 Discharge from Exits This State Rule and Regulation is not met as evidenced by: Based on observation and staff interview, the facility failed to maintain the exit discharge in accordance with the 1994 NFPA 101, Life Safety Code. The findings were: Observation on 8/9/2017 at 11:37 AM at the exit from the south memory care unit leading to the public way revealed that the walkway had a 38	S7010	S7010 NFPA 101 Discharge of Exit The facility will ensure that there will be direct access to an exit to a public way. A) The facility will ensure that the south memory care unit leading to a public way will provide with a guard or handrail. Maintenance Director, is acquiring bids from contractors and engineers to complete project by:	10/8/17

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

ED — 9/5/2017

ACCEPTED POC VIA PHONE CALL WITH THE ADMINISTRATOR LESLIE MILIKEN ON 9-19-2017.

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S7010	Continued From page 1 inch drop on one side and did not have a guard or handrail. Walkways that are more than 30 inches above the floor or the grade below shall be provided with guards to prevent falls over the open side. Failure to maintain walkways as required could result in injury or death during an emergency. Interview with the Facility Maintenance Manager at the time of observation indicated he was unaware of the requirement. REF: 1994 NFPA 101 Sections 12-2.2.6.1; 5-2.2.4.1	S7010		
S7016	NFPA Life Safety - Nfpa Medical Gases NFPA 101 Medical Gases This State Rule and Regulation is not met as evidenced by: Based on observation and staff interview, the facility failed to maintain medical gas storage in accordance with the 1994 NFPA 101, Life Safety Code and the 2005 NFPA 99, Health Care Facilities. The findings were: Observation on 8/9/2017 at 11:45 AM in the memory care office revealed approximately 450 cubic feet of oxygen stored in the non-rated room. Failure to maintain oxygen storage as required could result in injury or death during an emergency. Interview with the Facility Maintenance Manager at the time of observation indicated he was unaware of the requirement. REF: 1994 NFPA 101 Section 12-3.2.4 2005 NFPA 99 Section 9.4.2	S7016	S7016 NFPA 101 Medical Gases The facility will ensure that stored oxygen cylinders will not exceed 300 cubic feet in a unrated room by: A) Maintenance Director, will inspect office and Resident Rooms to ensure the oxygen cylinder is not over the limit of 300 cubic feet. B) Maintenance Director, will educate oxygen supply company and staff that oxygen cylinder cannot exceed 300 cubic feet. Maintenance Director, will monitor for compliance quarterly during quality audit reviews. Maintenance Director, and Quality assurance team will monitor for compliance quarterly during quality audit reviews.	9/14/17

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S7020	Continued From page 2	S7020		
S7020	NFPA Life Safety - Nfpa Extinguishment Req NFPA 101 Extinguishment Requirements This State Rule and Regulation is not met as evidenced by: Based on observation and staff interview, the facility failed to maintain extinguishment requirements in accordance with the 2006 NFPA 101, Life Safety Code, and the 2002 NFPA 13, Installation of Sprinkler Systems. The findings were: Observation on 8/9/2017 at 10:52 AM the interior courtyard adjacent to room 200 revealed the exterior of the exit was provided with a 70 inch overhang of Type V construction, and the overhang was not provided with sprinkler coverage. Further observation revealed that additional overhangs adjacent to rooms 119, 201, 209, 210 and 313 also entered into the interior courtyards and were approximately 70 inches without sprinkler detection. Failure to provide sprinkler coverage as required could result in injury or death during an emergency. Interview with the Facility Maintenance Manager at the time of observation indicated he was aware of the requirement. REF: 2006 NFPA 101 Sections 18.3.5; 9.7.1.1 2002 NFPA 13 Section 8.14.7.1	S7020	S7020 NFPA 101 Extinguishment Requirements The facility will ensure that all overhang exceeding 4' will have sprinkler per the requirements of NFPA 13: A) The facility will ensure that interior courtyards with adjacent rooms to 200,119,201,209,210,313 with overhangs exceeding 4' will have sprinkler per the requirements of NFPA 13. Maintenance Director is acquiring bids from contractor and engineers and/or a FSES will be done, this project will be completed by. Maintenance Director, will help facilitate with contractor and engineer.	10/8/17
S7999	State Miscellaneous Life Safety State Miscellaneous This STANDARD is not met as evidenced by: Based on observation and staff interview, the	S7999		

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S7999	Continued From page 3 facility failed to maintain fire barriers in accordance with the 1994 NFPA 101, Life Safety Code. The findings were: Observation on 8/9/2017 at 1:30 PM in the corridor access to the attic by room 117 revealed that the fire barrier in the attic area had several large penetrations exposing the structural members of the building. Failure to maintain fire barriers as required could result in injury or death during an emergency. Interview with the Facility Maintenance Manager at the time of observation indicated he was aware of the requirement. REF: 1994 NFPA 101 Section 6.2.2.2	S7999	S7999 NFPA 101 State Miscellaneous life Safety State Miscellaneous The facility will ensure that all fire barriers will be sealed from penetrations. A) The facility will ensure that the attic by room 117 will be sealed from all penetrations B) Maintenance Director, will inspect and seal all penetration in attic by room 117. Maintenance Director, will have this project completed by Maintenance Director, will monitor and maintain for compliance quarterly during quality audit reviews	10/8/17