Healthcare Licensing and Surveys

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ALF27	A. BUILDING: _____ B. WING _____	01/09/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MONDELL HEIGHTS RETIREMENT COMMUNIT	106 E MAIN STREET NEWCASTLE, WY 82701

(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 January 9, 2018. The facility was a one story, fully sprinklered building of Type II (111) construction built in 1949. The building was equipped with a supervised, automatic wet sprinkler system with a dry branch and a zoned fire alarm system. The facility had a capacity of 23 licensed beds with a census of 18 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		
S8015	NFPA Life Safety - Nfpa Prot from Hazards NFPA 101 Protection from Hazards This State Rule and Regulation is not met as evidenced by: . Based on observation and staff interview, the facility failed to maintain hazardous enclosures in accordance with the 1994 NFPA 101, Life Safety	S8015		

Talked To Diane Hudson, Administrator, on 2/8/18 @ 8:56 AM and advised her that we accepted The Poc on This Date.

2-8-18

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S8015	Continued From page 1 Code. The findings were: Observation on 1/9/2018 at 10:25 AM in the kitchen area revealed that the kitchen and dishwashing room were open to the corridor, and a breakfast room used by residents via pass-through openings from the kitchen and removal of the corridor door to the dishwashing room. Failure to maintain separation of hazard areas from other parts of the building as required could result in fire spread increasing the risk of injury or death. Interview with the Facility Maintenance Manager at the time of observation indicated he was unaware of the requirement. REF: 1994 NFPA 101, Sections: 22-3.3.2.1; 6-4	S8015		
S8017	NFPA Life Safety - Nfpa Det, Alarm & Comm Systems NFPA 101 Detection, Alarm and Communication Systems This State Rule and Regulation is not met as evidenced by: . Based on document review and staff interview, the facility failed to maintain fire alarm systems in accordance with the 1994 NFPA 101, Life Safety Code. The findings were: 1. Document review on 01/9/2018 at 11:28 AM revealed that the facility was unable to verify that each strobe and horn had passed visual and audible inspection on an annual basis. Failure to provide annual testing for fire alarm components as required increases the risk of death or injury due to fire. Interview with the Facility Administrator at the time of observation indicated	S8017		

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S8017	Continued From page 2 she was unaware of the requirement. REF: 1994 NFPA 101, Sections: 22-2.3.4; 7-6.1.4 2. Document review on 1/9/2018 at 11:28 AM revealed that the facility was unable to verify that a fire alarm battery load voltage test had been conducted on a semi-annual basis. Documentation indicated a test in April 2017. Failure to provide testing for fire alarm components as required increases the risk of death or injury due to fire. Interview with the Facility Administrator at the time of observation indicated she was unaware of the requirement. REF: 1994 NFPA 101, Sections: 22-2.3.4; 7-6.1.4 3. Document review on 1/9/2018 at 11:28 AM revealed that the facility was unable to verify that a sensitivity test had been conducted on all smoke detectors. Documentation showed only an "OK" next to each detector, and did not indicate the type of test performed. Failure to provide annual testing for fire alarm components as required increases the risk of death or injury due to fire. Interview with the Facility Administrator at the time of observation indicated she was unaware of the requirement. REF: 1994 NFPA 101, Sections: 22-2.3.4; 7-6.1.4	S8017		
S8018	NFPA Life Safety - Nfpa Extinguishment Req NFPA 101 Extinguishment Requirements This State Rule and Regulation is not met as evidenced by: .	S8018		

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S8018	Continued From page 3 Based on observation and staff interview, the facility failed to provide fire extinguishment requirements in accordance with the 1994 NFPA 101, Life Safety Code, and the 1994 NFPA 13, Installation of Sprinkler Systems. The findings were: 1. Observation on 1/9/2018 at 10:39 AM at the front entrance revealed the canopy was constructed of combustible materials and was not sprinklered. Failure to provide fire sprinklers as required could result in fire spread resulting in injury or death. Interview with the Facility Maintenance Manager at the time observation indicated he was unaware of the requirement. REF: 1994 NFPA 101, Sections: 22-3.3.5; 7-7.1 2. Observation on 1/9/2018 at 9:50 AM in the Bathing/Shower Room adjacent to the Janitor Closet revealed exposed Chlorinated Polyvinyl Chloride sprinkler piping. It could not be established that this piping was installed per manufacturers specifications. Failure to install fire sprinkler systems as required could cause system failure resulting in injury or death. Interview with the Facility Maintenance Manager at the time of observation indicated he could not verify if the piping was correctly installed, and he was unaware of the requirement. REF: 1994 NFPA 101, Sections: 22-3.3.5; 7-7.1 1994 NFPA 13, Section: 2-3.5 3. Observation on 1/9/2018 at 9:58 AM in the north exit patio (Garden Room) revealed a storage area containing combustible material underneath an overhang that did not have fire sprinklers installed. Failure to maintain hazardous areas as required could result in fire spread	S8018		

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S8018	Continued From page 4 resulting in injury or death. Interview with the Facility Maintenance Manager at the time of observation indicated he was unaware of the requirement. REF: 1994 NFPA 101, Section: 22-3.3.2.2 Based on document review and staff interview, the facility failed to maintain fire extinguishment equipment in accordance with the 1994 NFPA 101, Life Safety Code. The findings were: Document review on 1/9/2018 at 11:28 AM revealed the that the facility could not verify that the waterflow alarm and supervisory alarm had been tested quarterly. Documentation indicated a test in April 2017. Failure to test fire sprinkler equipment as required could result in sprinkler failure resulting in injury or death. Interview with the Facility Administrator at the time of observation indicated she was unaware of the requirement. REF: 1994 NFPA 101, Sections: 22-3.3.5: 7-7.1	S8018		
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 document review and staff interview, the facility failed to provide fire drills in accordance with the 1994 NFPA 101, Life Safety Code. The findings were:	S8027		

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S8027	Continued From page 5 Document review on 1/9/2018 at 11:28 AM revealed that the facility failed to conduct fire drills during March, September, and November 2017. Failure to conduct fire evacuation drills as required could result in delayed egress during an emergency resulting in injury or death. Interview with the Facility Administrator observation indicated she was aware of the requirement. REF: 1994 NFPA 101, Section: 31-7.3	S8027		
S8028	NFPA Life Safety - Smoking NFPA 101 Smoking This State Rule and Regulation is not met as evidenced by: . Based on observation and staff interview, the facility failed to maintain smoking regulations in accordance with the 1994 NFPA 101, Life Safety Code. The findings were: Observation on 1/9/2018 at 9:10 AM at the main entrance revealed that the facility did not post a No Smoking sign despite being a no smoking facility. No Smoking signs need to be posted at all main entrances to the facility to insure residents safety. Further observation revealed that the facility did not provide secondary signs with the language that prohibits smoking or the international symbol for no smoking. Interview with the Facility Maintenance Manager at the time of observation indicated awareness of the requirement. REF: 1994 NFPA 101 Section 31-4.4	S8028		

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S8999	Continued From page 6	S8999		
S8999	State Miscellaneous Life Safety State Miscellaneous This STANDARD is not met as evidenced by: . Based on observation and staff interviews, the facility failed to maintain decorations in accordance with the 1994 NFPA 101, Life Safety Code. The findings were: Observation on 1/9/2018 at 9:55 AM revealed false Christmas trees throughout the facility. The Facility Maintenance Manager could not confirm if the trees had been treated with a fire retardant as required. Failure to treat combustible decorations with a fire retardant as required could result in fire spread resulting in injury or death. Interview with the Facility Maintenance Manager at the time of observation indicated he was unaware of the requirement. REF: 1994 NFPA 101, Section: 31-4.5.4 Based on document review and staff interview, the facility failed to maintain emergency generators in accordance with the 1994 NFPA 101, Life Safety Code. The findings were: Document review on 1/9/2018 at 11:28 AM revealed that the facility was unable to verify the emergency generator had received weekly, monthly or annual testing. Failure to maintain emergency generator testing as required could result in generator failure increasing the risk of injury or death during an emergency. Interview with the Facility Administrator at the time of observation indicated awareness of the requirement.	S8999		

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S8999	Continued From page 7 REF: 1994 NFPA 101, Section: 31-1.3.8 Based on observation and staff interview, the facility failed to provide exhaust requirements in accordance with Chapter 3 Wyoming Rules and Regulations for Health Care Facilities. The findings were: Observation on 1/9/2018 at 9:47 AM in the Janitor's Closet adjacent to the Salon revealed that continuous mechanical exhaust ventilation was not provided for the room. Failure to provide exhaust ventilation as required could result in sickness for staff and residents. Interview with Facility Maintenance Manager at the time of observation indicated that he was unaware of the requirement. Ref: Chapter 3 Wyoming Rules and Regulations for Health Care Facilities Section 5 b (iv) (B)	S8999		

Mondell Heights Retirement Community
106 E. Main Street, Newcastle, WY 82701

307-941-1919
Fax-307-460-7007

Plan of Correction for January 9, 2018 Life Safety Survey

S8015 NFPA Life Safety 101 Protection from Hazards

The facility will maintain hazardous enclosures in accordance with the 1994 NFPA 101, Life Safety Code by:

1. Installing and testing as appropriate fire rated counter doors covering the pass through penetrations in the kitchen wall completed by appropriate parties;
2. Reinstalling the fire rated door on the dishroom opening completed by facility staff.
3. These actions will be completed by March 9, 2018.

S8017 NRPA Life Safety 101 Detection, Alarm and Communication Systems

The facility will maintain the fire alarm system in accordance with the 1994 NFPA 101, Life Safety Code by:

1. Inspecting on an annual basis the strobe and horn portion of the fire alarm system;
2. Testing the fire alarm battery load voltage on a semi-annual basis;
3. Test the sensitivity of all smoke detectors indicating the type of test performed.
4. Each of the above activities will be included in the testing contract with the outside testing firm.
5. These actions will be completed by March 9, 2018.

S8018 NFPA Life Safety 101 Extinguishment Requirements

The facility will provide fire extinguishment requirements in accordance with the 1994 NFPA 101, Life Safety Code and the 1994 NFPA 13 Installation of Sprinkler Systems by contracting with an approved Sprinkler Company to do the following:

1. Extension of the dry fire extinguishment system to the canopy on the front of the building;
2. Inspection of the sprinkler piping in the north bathing/shower room by a licensed sprinkler contractor to assure the correct material as required (new installation if necessary);
3. Extension of the dry fire extinguishment system to the overhang at the garden entrance of the building;
4. Confirm that the Fire Inspection contract includes the waterflow alarm and supervisory alarm testing quarterly;
5. These actions will be completed by March 9, 2018.

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Plan of Correction for January 9, 2018 Life Safety Survey

S8027 NFPA Life Safety 101 Emergency Egress and Relocation Drills

The facility will provide for adherence to requirements in accordance with the 1994 NFPA 101, Life Safety Code regarding evacuation drills by maintenance:

1. Conducting and documenting fire drills each month during the appropriate shift;
2. These drills will be added to the online calendar by the administrator and will be set to send email notifications to staff responsible and to management as a reminder.
3. These actions will be completed by March 9, 2018.

S8028 NFPA Life Safety 101 Smoking

The facility will provide for adherence to requirements in accordance with the 1994 NFPA 101, Life Safety Code regarding Smoking by maintenance staff:

1. Obtaining and posting No Smoking signs with the appropriate international symbol at each main entrance to the facility.
2. These actions will be completed by March 9, 2018.

S8999 State Miscellaneous Life Safety

The facility will provide for adherence to requirements in accordance with the 1994 NFPA 101, Life Safety Code regarding Christmas Tree fire retardant by maintenance staff:

1. Confirming that the existing trees and each new christmas tree brought into the facility will be treated with fire retardant as required and tagged.
2. These actions will be completed by March 9, 2018.

The facility will provide for adherence to requirements in accordance with the 1994 NFPA 101, Life Safety Code regarding Emergency Generator Testing by:

1. These weekly, monthly and annual tests will be added to the online calendar by the Administrator and will be set to send email notifications to staff responsible and to management as a reminder;
2. Adding the complete date of the testing to the form as completed by the facility staff to make the form more understandable.
3. These actions will be completed by March 9, 2018.

The facility will provide for adherence to requirements in accordance with the 1994 NFPA 101, Life Safety Code regarding Continuous Mechanical Exhaust Ventilation by maintenance staff:

1. Installation of a mechanical exhaust device in the Janitor's Closet adjacent to the Salon.
2. These actions will be completed by March 9, 2018.