STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	535019	A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	**03/02/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BONNIE BLUEJACKET MEMORIAL NURSING HOME	**388 SOUTH US HWY 20** **BASIN, WY 82410**

(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 A Life Safety Code survey was conducted by Healthcare Licensing and Surveys on 3/01/18. Requirements for Long Term Care Facilities Section 42 CFR 483.70 (a) except as otherwise provided in this section, the facility must meet the applicable provisions of the 2012 Edition of the Life Safety Code, Existing Health Care, of the National Fire Protection Association. The facility was a fully sprinklered, single story building of Type V (000) construction with plan approval in 1973. The building is equipped with a supervised, automatic wet sprinkler system and an addressable fire alarm system. The facility had a capacity of 37 certified Medicare and Medicaid beds with a census of 27 residents.	K 000		
K 131 SS=D	Multiple Occupancies CFR(s): NFPA 101 Multiple Occupancies - Sections of Health Care Facilities Sections of health care facilities classified as other occupancies meet all of the following: o They are not intended to serve four or more inpatients for purposes of housing, treatment, or customary access. o They are separated from areas of health care occupancies by construction having a minimum two hour fire resistance rating in accordance with Chapter 8. o The entire building is protected throughout by an approved, supervised automatic sprinkler system in accordance with Section 9.7.	K 131		4/30/18

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

Electronically Signed | 03/26/2018

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K 131	Continued From page 1 Hospital outpatient surgical departments are required to be classified as an Ambulatory Health Care Occupancy regardless of the number of patients served. 19.1.3.3, 42 CFR 482.41, 42 CFR 485.623 This REQUIREMENT is not met as evidenced by: Based on observation and staff interview the facility failed to properly maintain fire barriers in accordance with the 2012 NFPA 101 Life Safety Code. The deficiency affected one (1) of two (2) smoke compartments. The findings were: Observation on 3/02/18 at 10:35 AM revealed that the 2-hour fire barrier separating the nursing home from the hospital had unprotected electrical penetrations in the ceiling above the corridor. Failure to properly maintain fire barriers could result in injury or death in the event of a fire. Interview with the maintenance director at the time of the observation acknowledged the deficiency, and revealed that he was aware of the requirement, but was unaware of the unprotected penetrations. Reference: 2012 NFPA 101 19.1.3.5, 8.3.5.1	K 131	K131 - This requirement will be met as evidenced by: Electrical penetrations noted during the survey will be sealed with appropriated fire caulking. The fire barrier will be inspected for other possible unsealed penetrations. The Director of Plant Operations and maintenance staff will monitor future activities that may result in smoke barrier penetrations to ensure they are properly sealed to maintain the integrity of the fire wall. Sealing of the fire barrier will be completed by April 30, 2018.	
K 372 SS=E	Subdivision of Building Spaces - Smoke Barrie CFR(s): NFPA 101 Subdivision of Building Spaces - Smoke Barrier Construction 2012 EXISTING Smoke barriers shall be constructed to a 1/2-hour fire resistance rating per 8.5. Smoke barriers shall be permitted to terminate at an atrium wall.	K 372		4/30/18

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K 372	Continued From page 2 Smoke dampers are not required in duct penetrations in fully ducted HVAC systems where an approved sprinkler system is installed for smoke compartments adjacent to the smoke barrier. 19.3.7.3, 8.6.7.1(1) Describe any mechanical smoke control system in REMARKS. This REQUIREMENT is not met as evidenced by: Based on observation and staff interview the facility failed to properly maintain smoke barriers in accordance with the 2012 NFPA 101 Life Safety Code. The deficiency affected two (2) of two (2) smoke compartments. The findings were: Observation on 3/02/18 at 10:45 AM revealed that the smoke barrier separating the facility's two smoke compartments had unprotected electrical and plumbing penetrations in the ceiling above the corridor and lounge area. Failure to properly maintain smoke barriers could result in injury or death in the event of a fire. Interview with the maintenance director at the time of the observation acknowledged the deficiency, and revealed that he was aware of the requirement, but was unaware of the unprotected penetrations. Reference: 2012 NFPA 101 19.3.7.3, 8.5.6.2	K 372	K372 - This regulation will be met as evidenced by: Electrical and plumbing penetrations noted during the survey will sealed with appropriate fire caulking. The smoke barrier will be inspected for other possible unsealed penetrations. The director of Plant Operations and maintenance staff will monitor future activities that may result in smoke barrier penetrations to ensure they are properly sealed to maintain the integrity of the fire wall. Sealing of the smoke barrier will be completed by April 30, 2018.	
K 920 SS=D	Electrical Equipment - Power Cords and Extens CFR(s): NFPA 101 Electrical Equipment - Power Cords and Extension Cords Power strips in a patient care vicinity are only used for components of movable	K 920		4/30/18

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K 920	Continued From page 3 patient-care-related electrical equipment (PCREE) assembles that have been assembled by qualified personnel and meet the conditions of 10.2.3.6. Power strips in the patient care vicinity may not be used for non-PCREE (e.g., personal electronics), except in long-term care resident rooms that do not use PCREE. Power strips for PCREE meet UL 1363A or UL 60601-1. Power strips for non-PCREE in the patient care rooms (outside of vicinity) meet UL 1363. In non-patient care rooms, power strips meet other UL standards. All power strips are used with general precautions. Extension cords are not used as a substitute for fixed wiring of a structure. Extension cords used temporarily are removed immediately upon completion of the purpose for which it was installed and meets the conditions of 10.2.4. 10.2.3.6 (NFPA 99), 10.2.4 (NFPA 99), 400-8 (NFPA 70), 590.3(D) (NFPA 70), TIA 12-5 This REQUIREMENT is not met as evidenced by: Based on observation and staff interview the facility failed to properly use power cords in accordance with the 2012 NFPA 99 Health Care Facilities Code. The deficiency affected one (1) of two (2) smoke compartments. The findings were: Observation on 3/02/18 at 9:55 AM in resident room 106 revealed that an oxygen concentrator was plugged into a power cord. The power cord had a UL listing of 31F8 which does not meet the CMS required UL listing for patient-care-related electrical equipment. Failure to properly use power cords could result in injury or death by creating an electrical hazard. Interview with the maintenance director at the time of the	K 920	K920 - This regulation will be met as evidenced by: The Director of Operations will conduct staff education on utilization of power strips for patient care related electrical equipment as well as conduct a thorough audit of the facility. The Director of Plant Operations and maintenance staff will conduct random audits to ensure continuing compliance. Staff education will be completed by April 30th 2018.	

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K 920	Continued From page 4 observation acknowledged the deficiency, and revealed that he was aware of the requirements, but was unaware of the resident medical equipment being plugged into the power cord. Reference: 2012 NFPA 99 10.2.4.2	K 920		