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JUL 1 2018

PRINTED: 06/13/2018
FORM APPROVED

Healthcare Licensing and Surveys

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: WY9019	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/07/2018
NAME OF PROVIDER OR SUPPLIER MOUNTAIN LODGE LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 110 BIRCH STREET DOUGLAS, WY 82633		
(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 and complaint investigation were conducted by Healthcare Licensing and Surveys on June 7, 2018. The complaint investigation was prompted by intake LIC-18-032. The facility was a two story fully sprinklered building of Type V (111) construction built in 2018. The building was equipped with a supervised automatic wet and dry-pipe sprinkler system, and an addressable fire alarm system. The secure wing of the building is separated from the remainder of the structure via a 2-hour fire separation to distinguish between the Board and Care and Healthcare occupancies of the facility. The facility had a capacity of 34 licensed beds with a census of 7 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 operations 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 the 2006 Edition of the Life Safety Code, NFPA 101, New Health Care and New Board and Care, of the National Fire Protection Association, unless otherwise noted.	S 000		
S7029	NFPA Life Safety - Nfpa Evac&Reloc Plan & Fire Dr	S7029		

Wyoming Dept of Health, Aging Division, Healthcare Licensing and Surveys
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Jonie Roth-Dautner

7-2-18

STATE FORM

HHGP11

If continuation sheet 1 of 2

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S7029	Continued From page 1 NFPA 101 Evacuation and Relocation Plan and Fire Drills This State Rule and Regulation is not met as evidenced by: Based on document review and staff interview, the facility failed to conduct fire drills in accordance with the Wyoming Department of Health Chapter 12, Program Administration of Assisted Living Facilities, and the 2006 NFPA 101, Life Safety Code. Failure to conduct fire drills as required could result in injury or death during an emergency. The deficiency affected 100 percent of the facility, as well as the 7 residents and staff. Document review on 6/7/2018 at 11:30 AM revealed that the facility failed to conduct the required fire drill during the month of April 2018. Interview with the facility administrator at the time of observation acknowledged a fire drill was not conducted during the month of April, and indicated she was aware of the requirement. REF: WDH Chapter 12, Section 7 (a)(iii)(E) 2006 NFPA 101, Life Safety Code, Section 32.7	S7029	This facility will conduct fire drills that include 100 percent of the facility, the staff, and the residents on a monthly basis. Administrator or designee will plan and execute a fire drill on a monthly basis and at different times of day and night for everyone living and working at Mountain Lodge. 07/22/2018 QAPI PiP will be used to monitor the completion of monthly fire drills. The PiP will be completed and reported to the QAPI Team monthly for 6 months. 08/06/2018	

Wyoming Dept of Health, Aging Division, Healthcare Licensing and Surveys
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If continuation sheet 2 of 2

TALKED TO TONYA ROTHLEUTNER, Administrator, by
Phone and advised her that her PIP of corrected
was accepted as of 7/2/18 @ 1:30 PM.
Will P. Alexander
30730