PRINTED: 06/01/2018
FORM APPROVED

Healthcare Licensing and Surveys

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ALF024	A. BUILDING: _____ B. WING _____	R 05/17/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WILLOW CREEK HOMES OF BUFFALO	1 NORTH KLONDIKE BUFFALO, WY 82834

(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}	Opening Comments Rules and Regulations utilized for this survey are: Rules and Regulations for Program Administration of Assisted Living Facilities, Chapter 12, effective 12/12/2007 Rules and Regulations for Licensure of Assisted Living Facilities, Chapter 4, effective 06/28/2001 A revisit survey was conducted on 5/16/18 through 5/17/18 for all previous deficiencies cited on 1/26/18.	{S 000}		
{S5018}	Ch 12 Sec 7 (a)(ix)(A) Assisted Living Facility (ALF) Core Services (a) The assisted living facility core services include the following: (ix) Assessments completed by a Registered Nurse. (A) Registered Nurse medication review every two (2) months or sixty-two (62) days or whenever new medication is prescribed or the resident's medication is changed; This State Rule and Regulation is not met as evidenced by: Based on medical record review and staff interview, the facility failed to ensure a Registered Nurse completed a medication review every 2 months (62 days) or when a new medication was ordered for 6 of 8 sample residents (#2, #3, #4, #6, #10, #A) who received medications. The findings were: 1. Review of the medical record for resident #2 showed the last medication regimen review was completed on 2/23/18.	{S5018}		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: _____ TITLE: President (X6) DATE: 7/19/18

7/24/18 - 9:50 Am - I spoke with Eric McMillan and Nicollette Hanson to inform them the plan of correction was accepted. Tim Cowe

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{S5018}	Continued From page 1 2. Review of the medical record for resident #3 showed the last medication regimen review was completed on 2/23/18. 3. Review of the medical record for resident #4 showed the last medication regimen review was completed on 2/23/18. 4. Review of the medical record for resident #6 showed the last medication regimen review was completed on 2/23/18. 5. Review of the medical record for resident #10 showed the last medication regimen review was completed on 2/25/18. 6. Review of the medical record for resident #A showed the last medication regimen review was completed on 2/23/18. 7. Interview with the regional nurse on 6/16/18 at 6:40 PM revealed the medication regimen reviews were scheduled to be completed quarterly and she was unsure why they were scheduled that way.	{S5018}		7/19/18

Willow Creek of Buffalo

Buffalo

Date of Survey: 05/17/2018

ID Prefix Tag

S5018 Ch 12 Sec 7 (a)(ix)(A) Assisted Living Facilities (ALF) Core Services

1. Each resident will have a medication self-assessment completed by contract RN or DON every 62-days, anytime there is a medication change, anytime there is a new medication ordered, or anytime there is a change in condition.
2. Resident #2, #4, #6, #7, #9, #10, and A completed self-medication assessments with DON on 07/05/2018.
3. All other residents in facility were audited and received a current 62-day self-medication assessment on 07/05/2018.
4. Resident #3 discharged from facility on 06/18/2018.
5. Resident medication orders, changes to current medication orders, and change of conditions will be discussed in monthly QA meetings with manager, contract RN, or DON monthly.
6. House manager received education regarding change of condition, changes in medication orders, and new medication orders on 07/05/2018.
7. All medication orders received from provider will be kept in a binder for review at each monthly QA meeting. New orders will be filed in Resident charts.
8. Date of compliance 07/20/2018.

7/19/18