PRINTED: 09/12/2018
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 _____	08/30/2018

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	General Comments A Life Safety Code survey was conducted on August 30, 2018 by Healthcare Licensing and Surveys. The facility was a single story fully sprinklered building of Type V(000) construction built in 1998. The building was equipped with a supervised automatic wet 13R sprinkler system with an addressable fire alarm system. The facility had a capacity of 15 licensed beds with a census 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 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		
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 conduct Fire Exit Drills in accordance with the 1994 NFPA 101 Life Safety	S8027		

Wyoming Dept of Health, Aging Division, Healthcare Licensing and Surveys
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

STATE FORM 6899 W51J11 If continuation sheet 1 of 2

P.O.C accepted via phone call with President Eric McMurch 04 2018 at 10:50 AM on 10/05/2018. Martha Hausmann

RECEIVED
OCT 04 2018
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S8027	Continued From page 1 Code. Failure to conduct fire exit drills could result in injury or death in the event of a fire. The deficiency affected all 7 residents and staff. The findings were: Document review on 08/30/18 at 12:15 PM revealed that all fire exit drills performed within the past 12 months have been conducted either during the day or evening, and none during the night while residents are sleeping. At least two (2) of the required twelve (12) fire exit drills shall be conducted at night. Interview with the assistant administrator at the time of documentation review acknowledged the deficiency, but indicated they were unaware the requirement. Interview with the administrator at the time of exit acknowledged the deficiency. Reference: 1994 NFPA 101 31-7.3 WDH chapter 12 Administration Rules, Program Administration of Assisted Living Facilities, Section 7(o)(iii)(E).	S8027		

10/4/18

Willow Creek
ElderCare Communities

Buffalo Life Safety

Survey Date: August 30, 2018

ID Prefix Tag

S8027 NFPA Emergency Egress and Relocation Drills

1. Fire drills completed monthly.
2. Each month the fire drill will be held on a different shift to meet requirements, with at least two (2) fire drills on the night shift per 12 months.
3. Fire drills will be logged and documented according to policy.
4. Night fire drill was held on 10/03/2018.
5. Monthly fire drills will be discussed in monthly QA.
6. Date of compliance 10/04/2018.

Eric McMillan, President: _____ Date: 10/4/18