STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	535017	A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	**03/19/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SUBLETTE CENTER	**333 N BRIDGER AVE** **PINEDALE, WY 82941**

(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 March 13-14, 2019. Requirements for Long Tern 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 (111) construction built in 1976 and 1983. The building was equipped with a supervised, automatic wet sprinkler system with an anti-freeze loop, and a zoned fire alarm system. The facility had a capacity of 50 Medicare and Medicaid beds with a census of 29 residents. .	K 000		
K 291 SS=D	Emergency Lighting CFR(s): NFPA 101 Emergency Lighting Emergency lighting of at least 1-1/2-hour duration is provided automatically in accordance with 7.9. 18.2.9.1, 19.2.9.1 This REQUIREMENT is not met as evidenced by: Based on document review and staff interview, the facility failed to provide emergency lighting in accordance with the 2012 NFPA 101, Life Safety Code and the 2010 NFPA 110, Standard for Emergency and Standby Power Systems. Failure to provide emergency lighting as required could delay egress resulting in injury or death. The deficiency affected 1 of numerous requirements of the emergency lighting system. The findings	K 291	Tag 0291: The facility failed to provide emergency lighting in accordance with the 2012 NFPA 101, Life Safety Code and the 2010 NFPA 110, Standard for Emergency and Standby Power Systems. Failure to provide emergency lighting as required could delay egress resulting in injury or death. The deficiency affected 1 of numerous requirements of the emergency	4/10/19

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

Electronically Signed | 04/03/2019

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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K 291	Continued From page 1 were: Document review on 3/14/2019 at 10:10 AM revealed the required monthly testing and recording of electrolyte specific gravity or conductance results (Reserve Capacity "RC") of the lead acid batteries in connection with the emergency power supply system (generator) were not completed as required. The emergency power supply system provides power for emergency lighting. Interview with the facility maintenance manager at the time of observation acknowledged the deficiency, and indicated he was unaware of the requirement. Interview with the CNA director at the time of exit acknowledged the deficiency. REF: 2012 NFPA 101, Sections: 19.2.9.1; 7.9.2.4; 4.6.12.1 2010 NFPA 110, Section: 8.3.7.1 Based on observation and staff interview, the facility failed to provide emergency lighting in accordance with the 2010 NFPA 110, Standard for Emergency and Standby Power Systems. Failure to provide emergency lighting as required could result in injury or death during an emergency. The deficiency affected less than 10 percent of the facility. The findings were: Observation on 3/14/2019 at 8:56 AM in the emergency generator transfer switch room revealed no battery powered emergency lighting was provided. In an emergency where the transfer switch failed to operate the battery powered emergency lighting would provide	K 291	lighting system. The findings were: Facility failed to provide record of required monthly testing and recording of electrolyte specific gravity or conductance results of the lead acid batteries in connection with the emergency power supply system. To correct this deficiency: 1. The facility purchased appropriate testing equipment on 03/19/2019. 2. The batteries were tested 03/27/2019 and found them to be good. 3. The maintenance department is now scheduled to perform the testing monthly; they developed and will continue upkeep of a log which records the date of testing as well as the results. 3. Maintenance will report on testing dates at the next scheduled QAPI on June 12 and regularly thereafter. The facility failed to provide emergency lighting in accordance with the 2010 NFPA 110, Standard for Emergency and Standby Power Systems. Failure to provide emergency lighting as required could result in injury or death during an emergency. The deficiency affected less than 10 percent of the facility. The findings were: Observation on 3/14/2019 at 8:56 AM in the emergency generator transfer switch room revealed no battery powered emergency lighting was provided. In an	

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SUBLETTE CENTER	**333 N BRIDGER AVE** **PINEDALE, WY 82941**

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K 291	Continued From page 2 illumination at the transfer switch. Interview with the facility maintenance manager at the time of observation acknowledged the deficiency, and indicated he was unaware of the requirement. Interview with the CNA director at the time of exit acknowledged the deficiency. REF: 2010 NFPA 110, Section: 7.3.1 .	K 291	emergency where the transfer switch failed to operate the battery powered emergency lighting would provide illumination at the transfer switch. To correct this deficiency: 1. Emergency lighting was ordered by maintenance on 03/19/2019. 2. Maintenance will install lighting on 04/10/2019 and ensure proper functioning. 3. To prevent further issues, maintenance is now scheduled to check emergency lighting monthly. A log was developed and will be kept current. 4. Maintenance will report as a function of regularly scheduled QAPI on June 12 and regularly thereafter.	
K 914 SS=F	Electrical Systems - Maintenance and Testing CFR(s): NFPA 101 Electrical Systems - Maintenance and Testing Hospital-grade receptacles at patient bed locations and where deep sedation or general anesthesia is administered, are tested after initial installation, replacement or servicing. Additional testing is performed at intervals defined by documented performance data. Receptacles not listed as hospital-grade at these locations are tested at intervals not exceeding 12 months. Line isolation monitors (LIM), if installed, are tested at intervals of less than or equal to 1 month by actuating the LIM test switch per 6.3.2.6.3.6, which activates both visual and audible alarm. For LIM circuits with automated self-testing, this	K 914		4/9/19

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	535017	A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	**03/19/2019**

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K 914	Continued From page 3 manual test is performed at intervals less than or equal to 12 months. LIM circuits are tested per 6.3.3.3.2 after any repair or renovation to the electric distribution system. Records are maintained of required tests and associated repairs or modifications, containing date, room or area tested, and results. 6.3.4 (NFPA 99) This REQUIREMENT is not met as evidenced by: Based on document review and staff interview, the facility failed to maintain electrical systems in accordance with the 2012 NFPA 99, Health Care Facilities Code. Failure to maintain electrical systems as required could result in injury or death. The deficiency affected 1 of 1 testing requirement. The findings were: Document review on 3/14/2019 at 10:30 AM revealed that the facility could not verify that non-hospital grade receptacles in the patient care areas had been tested within the past 12 months. Interview with the facility maintenance manager at the time of observation acknowledged the deficiency, and indicated he was unaware of the requirement. Interview with the CNA director at the time of exit acknowledged the deficiency. REF: 2012 NFPA 99, Sections: 6.3.4.1.3; 6.3.3.2	K 914	K214: The facility failed to maintain electrical systems in accordance with the 2012 NFPA 99, Health Care Facilities Code. Failure to maintain electrical systems as required could result in injury or death. The deficiency affected 1 of 1 testing requirement. The findings were: Document review on 3/14/2019 at 10:30 AM revealed that the facility could not verify that non-hospital grade receptacles in the patient care areas had been tested within the past 12 months. To correct this deficiency: 1. Maintenance purchased the proper testing equipment on 03/20/2019 2. Testing of all facility receptacles in patient care areas will be completed by 04/09/2019 3. Maintenance is now scheduled to perform this testing every six months. A log was created to show time and results of the testing and will be kept current. 4. Maintenance will report as a function of our regularly scheduled QAPI on June 12th and regularly thereafter.	

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E 000	Initial Comments An Emergency Preparedness survey was conducted by Healthcare Licensing and Surveys on March 18, 2019. Based upon the findings of the survey team, it was determined the facility was in compliance with all requirements.	E 000		

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

Electronically Signed | 03/28/2019

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