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NOV 25 2019

PRINTED: 11/07/2019
FORM APPROVED

Healthcare Licensing and Surveys

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ALF011	(X2) MULTIPLE BUILDING SURVEY A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED R 11/07/2019
NAME OF PROVIDER OR SUPPLIER TENDER HEART ASSISTED LIVING FACILITY			STREET ADDRESS, CITY, STATE, ZIP CODE 624 TWIN RIDGE AVENUE EVANSTON, WY 82930		
(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 revisit survey was conducted by Healthcare Licensing and Surveys on October 23, 2019 through November 7, 2019 for deficiencies previously cited on September 11, 2019. The facility was a fully sprinklered, single story building of Type V (III) construction built in 2006. The building was equipped with a supervised automatic wet 13R sprinkler system, and an addressable fire alarm system. The facility had a capacity of 16 licensed beds with a census of 14 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 Healthcare Facilities apply. (II) Assisted Living Facilities in 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, 2006 Edition, unless noted otherwise.	{S 000}			
{S8031}	IMC Life Safety - Int'l Mechanical Code This State Rule and Regulation is not met as evidenced by: Based on off-site review of photographs submitted by the facility, the facility failed to provide ventilation openings into the building in accordance with the 2006 International	{S8031}			

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

TITLE

(X6) DATE

STATE FORM

10F712

If continuation sheet 1 of 2

Talked to Cher: Willard, Administrator, Per Phone on 12/6/19 @ 9:30 AM and advised her of POC Acceptance.
Will PAK 12/13/19

Healthcare Licensing and Surveys

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ALF011	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 11/07/2019
NAME OF PROVIDER OR SUPPLIER TENDER HEART ASSISTED LIVING FACILITY		STREET ADDRESS, CITY, STATE, ZIP CODE 624 TWIN RIDGE AVENUE EVANSTON, WY 82930		
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{S8031}	Continued From page 1 Mechanical Code. Failure to provide ventilation air openings as required could lead to the infiltration of toxic or noxious fumes, which is detrimental to the health of the residents. The findings were: Review of photographs provided by the facility via email on 11/06/19 to demonstrate compliance with the previously cited deficiency regarding make-up air for the dryers (cited on 09/11/19) revealed that a ventilation intake had been installed through the ceiling and up through the roof to allow intake of make-up air to the laundry room. Further observation revealed that the newly installed intake was located immediately adjacent to two (2) furnace flues, which may permit products of combustion to be drawn into the laundry room. Ventilation intake openings are required to be located a minimum of 10 feet from a hazardous or noxious contaminant source. Attempts to interview the facility administrator were made on 11/07/19 via email to confirm the location of the ventilation intake, but no response was received. REF: 2006 International Mechanical Code, Section 401.4.1	{S8031}		

Tender Heart Assisted Living Facility
Date of Survey: 09/11/2019
Resurvey: 11/07/2019

Tag# S8031

The facility will ensure make-up air will be provided into an area with multiple dryers.

Make-up air vents will be installed in the laundry facility within the facility. The make-up air vent will be located a minimum of 10 feet from a contaminant source.

The Manager will monitor to ensure all required new system installation is completed.

12/02/2019