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Healthcare Licensing and Surveys

PRINTED: 02/02/2021
FORM APPROVED

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ALF007	A. BUILDING _____ B. WING _____	01/22/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
POINTE FRONTIER RETIREMENT COMMUNITY	1406 PRAIRIE AVENUE CHEYENNE, WY 82009

(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 by Healthcare Licensing and Surveys on January 22, 2021. The facility was located on the garden level of a fully sprinklered three story building of Type II (111) construction built in 1988. The building was equipped with a supervised automatic wet sprinkler system with a dry branch and anti-freeze branches, and a zoned fire alarm system. The facility had a capacity of 50 licensed beds with a census of 44 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 the 1994 Edition of the Life Safety Code, NFPA 101, Existing Residential Board and Care, of the National Fire Protection Association, and the Wyoming Department of Health Chapter 3 Construction Rules for Health Care Facilities.	S 000		
S8018	NFPA Life Safety - Nfpa Extinguishment Req NFPA 101 Extinguishment Requirements This State Rule and Regulation is not met as evidenced by:	S8018		

Talked To Molly Stimson, Executive Director by Phone on 2/16/21 @ 9:30 AM and advised her of The Plan of Correction Acceptance. Will P Ady 38730

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S8018	Continued From page 1 Based on observation and staff interview, the facility failed to maintain sprinkler systems in accordance with the 1994 NFPA 101, Life Safety Code, and the 1994 NFPA 13, Standard for the Installation of Sprinkler Systems. Failure to maintain sprinkler systems as required could result in injury or death during an emergency. The deficiency affected one (1) of numerous rooms in the facility. The findings were: Observation on 1/22/21 at 9:27 AM in room 26 revealed a sprinkler head with a missing escutcheon. Interview with the facility maintenance director at the time of observation and exit acknowledged the deficiency and indicated awareness of the requirement. REF: 1994 NFPA 101, Section: 7-7.1.1 1993 NFPA 13, Section: 2-2.6.2	S8018		
S8999	State Miscellaneous Life Safety State Miscellaneous This STANDARD is not met as evidenced by: Based on observation and staff interview, the facility failed to maintain medical gas cylinders in accordance with the 1993 NFPA 99, Health Care Facilities Code. Failure to maintain medical gas cylinders as required could result in injury or death. The deficiency affected one (1) of numerous rooms in the facility. The findings were: Observation on 1/22/21 at 10:15 AM in the garden level electrical room revealed a nitrogen cylinder sitting on the floor unsecured.	S8999		

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S8999	Continued From page 2 Interview with the facility maintenance director at the time of observation and exit acknowledged the deficiency and indicated awareness of the requirement. REF: 1993 NFPA 99, Section: 4-3.1.1.2(3) Based on observation and staff interview, the facility failed to maintain electrical systems in accordance with the 1994 NFPA 101, Life Safety Code, and the 1993 NFPA 70, National Electrical Code. Failure to maintain electrical systems as required could result in injury or death during an emergency. The deficiency affected one (1) of numerous rooms in the facility. The findings were: Observation on 1/22/21 at 9:15 AM in the kitchen revealed an extension cord. Further observation revealed a floor fan plugged into the extension cord. Interview with the facility maintenance director at the time of observation and exit acknowledged the deficiency and indicated awareness of the requirement. REF: 1994 NFPA 101, Section: 7-1.2 1993 NFPA 70, Section: 400-8	S8999		

Plan of Correction

TAG# S8018

Responses to the cited deficiencies do not constitute an admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the Statement of Deficiencies. The Plan of Correction is prepared solely as a matter of compliance with Federal and State Law.

Date Completed

A. Apartment 26 revealed a sprinkler head with a missing escutcheon.

1. With Respect to the Specific requirement cited:
Sprinkler head identified has been repaired. Escutcheon has been put on. **2/12/2021**

2. With Respect to How the Facility will identify Potential Concerns and Take Corrective Action:
All other sprinkler heads have been visibly inspected to ensure there are no Other escutcheons missing.

3. With Respect to What Systemic Measures have been put in place to address Stated concern:
Sprinkler head checks will be added to our quarterly maintenance inspection to Ensure compliance with this requirement and prevent reoccurrence. Facility Maintenance manager will complete and maintain all required Inspections for review by Executive Director.

4. With Respect to How the Plan of Corrective Measures will be monitored:
Facility Maintenance manager will complete and maintain all required Inspections for review by Executive Director quarterly.

Plan of Correction

TAG# S8999

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Date Completed

A. Kitchen revealed an extension cord.

1. With Respect to the Specific requirement cited:
Extension cord has been removed. **2/12/2021**

2. With Respect to How the Facility will identify Potential Concerns and Take Corrective Action:
Each facility department director will daily ensure their common areas are compliant NFPA 70. All infractions will be reported immediately to our facility maintenance Director.

3. With Respect to What Systemic Measures have been put in place to address Stated concern:
Extension cord checks will be added to our quarterly maintenance inspection to Ensure compliance with this requirement and prevent reoccurrence. Facility Maintenance manager will complete and maintain all required Inspections for review by Executive Director.

4. With Respect to How the Plan of Corrective Measures will be monitored:
Facility Maintenance manager will complete and maintain all required Inspections for review by Executive Director quarterly.

Plan of Correction

TAG# S8999

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Date Completed

A. Garden level electrical room revealed a nitrogen cylinder sitting on the floor unsecured.

1. With Respect to the Specific requirement cited:
Nitrogen cylinder has been returned to vendor. **2/12/2021**

2. With Respect to How the Facility will identify Potential Concerns and Take Corrective Action:
Nitrogen cylinder was no longer needed and returned to vendor. Electrical room has inspected to ensure no other cylinders were present.

3. With Respect to What Systemic Measures have been put in place to address Stated concern:
Nitrogen cylinder check will be added to our quarterly maintenance inspection to Ensure compliance with this requirement and prevent reoccurrence. Facility Maintenance manager will complete and maintain all required Inspections for review by Executive Director.

4. With Respect to How the Plan of Corrective Measures will be monitored:
Facility Maintenance manager will complete and maintain all required Inspections for review by Executive Director quarterly.