DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 03/18/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	535029	A. BUILDING 01 B. WING _____	03/02/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CROOK COUNTY MEDICAL SERVICES DISTRICT LTC	713 OAK STREET SUNDANCE, WY 82729

(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
E 000	Initial Comments An Emergency Preparedness survey was conducted by Healthcare Licensing and Surveys on March 2, 2021. Based on the findings it was determined the facility was in compliance with all requirements.	E 000		
K 000	INITIAL COMMENTS A Life Safety Code survey was conducted by Healthcare Licensing and Surveys on March 2, 2021. Requirements for Long Term 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 II (111) construction built in 1985. The building was equipped with a supervised automatic wet sprinkler system, and an addressable fire alarm system. The facility had a capacity of 32 certified Medicare and Medicaid beds with a census of 26 residents.	K 000		
K 345 SS=D	Fire Alarm System - Testing and Maintenance CFR(s): NFPA 101 Fire Alarm System - Testing and Maintenance A fire alarm system is tested and maintained in accordance with an approved program complying with the requirements of NFPA 70, National Electric Code, and NFPA 72, National Fire Alarm and Signaling Code. Records of system acceptance, maintenance and testing are readily	K 345		

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

CFO | 4-1-2021

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.

Talked To Micki Cox on April 2, 2021 @ 9:30 AM and advised her of the PoC Acceptance.
Will f/u 38730

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K 345	Continued From page 1 available. 9.6.1.3, 9.6.1.5, NFPA 70, NFPA 72 This REQUIREMENT is not met as evidenced by; Based on document review and staff interview, the facility failed to maintain fire alarm systems in accordance with the 2012 NFPA 101, Life Safety Code and the 2010 NFPA 72, National Fire Alarm and Signaling Code. Failure to maintain fire alarm systems as required could result in injury or death during an emergency. The deficiency affected one (1) of three (3) testing requirements of the fire alarm system. The findings were: Document review on 3/2/2021 at 1:20 PM revealed the facility could not verify that each horn and strobe notification device had passed visual and audible inspection during the previous twelve (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 facility administrator at the time of exit acknowledged the deficiency. REF: 2012 NFPA 101, Sections: 19.3.4.1; 9.6.1.5 2010 NFPA 72, Sections: 14.4.5(20); 14.6.2.4; Figure 14.6.2.4 page 11	K 345		

CROOK COUNTY MEDICAL SERVICES DISTRICT

Crook County Medical Services District

Life Safety Code Plan of Corrections

A Life Safety Code survey was conducted by Healthcare Licensing and Surveys March 2, 2021. Fire Alarm System – Testing and Maintenance CFR(s): NFPA 101 tag K 345 was issued. Based on document review and staff interview, the facility failed to maintain fire alarm systems in accordance with 2012 NFPA 101 Life Safety Code and the NFPA 72 National Fire Alarm and Signaling Code. Document review revealed the facility could not verify that each horn and strobe notification device had passed visual and audible inspection during the previous twelve months.

On March 31, 2021 Rocky Mountain Fire Systems Inc. will be on site to locate, label, and give a description to each horn and strobe facility wide for future testing to ensure all horns and strobes receive audible and visual inspection.

Crook County Medical Services District Maintenance staff will accompany Rocky Mountain Fire Systems Inc. to ensure all horns and strobes are located, receive a label, and description.

Crook County Medical Services District Maintenance staff will also accompany Rocky Mountain Fire Systems Inc. during future annual testing to ensure all horns and strobes receive audible and visual inspection.

MLyons

Micki Lyons

CEO

Crook County Medical Services District