

Healthcare Licensing and Surveys

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: WY0006	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 08/03/2021
NAME OF PROVIDER OR SUPPLIER LARAMIE CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 503 S 18TH ST LARAMIE, WY 82070		
(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 from August 2 to August 3, 2021. Wyoming Department of Health, Rules and Regulations for Licensure of Nursing Care Facilities Chapter 19, Section 8 Life Safety and Electrical Safety. The requirements in the Department of Health Chapter III, Construction Rules and Regulations for Healthcare Facilities apply. The facility was a fully sprinklered, two-story building with a basement of Type V (111) construction built in 1920, 1972, and 1993. 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 105 certified Medicare and Medicaid beds with a census of 50 residents.	{S 000}		
{S7016}	NFPA Life Safety - Nfpa Medical Gases NFPA 101 Medical Gases This State Rule and Regulation is not met as evidenced by: Based on observation and staff interview, the facility failed to maintain areas for storage of positive pressure gases in accordance with the 2006 International Fire Code (IFC). Failure to maintain areas for storage of positive pressure gases could result in injury or death in an emergency. The deficiency affected one (1) of one (1) pressurized gas storage locations. The findings were:	{S7016}	Corrective Changes: Oxygen over the allowable amount will be removed from the oxygen room on or before the date of compliance by Maintenance/Designee. A professional Maintenance company or Designee will install the required ventilation for areas string or transfilling medical gasses in accordance with NFPA 99, Healthcare facilities code, on or before alleged date of compliance.	9/2/21

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

TITLE

(X6) DATE

Electronically Signed

08/16/21

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{S7016}	Continued From page 1 Observation on 08/02/21 at 11:45 AM in the medical gas storage and transfilling room revealed that the space exceeded the permit amount for compressed gases located within the building, requiring compliance with IFC Section 3006.2.1 for one-hour exterior rooms. It was observed that the space was provided with a mechanical exhaust fan located at the ceiling, and that the room's window had been left open for ventilation. IFC 3006.2.1 requires that the exterior wall be provided with upper and lower vents, each of an area not less than 36 square inches. These vents must be located within six inches of the ceiling and floor, respectively. Additionally, IFC 3006.2.1 requires that the space be constructed of 1-hr rated construction. It was observed that the room was provided with a 90 minute fire-rated door, but it could not be established that the wall construction was appropriate to satisfy the requirements of a 1-hr fire barrier. Interview with the facility maintenance manager at the time of the observation acknowledged the deficiency. Interview with the facility administrator and director of nursing at the time of exit acknowledged the deficiency. They indicated that the facility is currently working to develop plans for submission to the State for review and acceptance to begin work to correct the deficiencies. REF: 2006 International Fire Code, Sections 3006.1, 3006.2, 3006.2.1, Table 105.6.8, and Table 105.6.10	{S7016}	Identification: Residents who reside at Laramie Care Center are at potential risk. Systemic Changes: NHA will re-educate the Maintenance Department of the allowable storage amount and the required ventilation per NFPA 99, Health Care 2012 Facilities Code. Monitoring: The Maintenance Director/Designee will monitor weekly the amount of oxygen stored and ensure oxygen rooms comply with the required ventilation for 4 weeks or until facility sustains compliance. Any non-compliance will be corrected at that time and reported to QAPI and Safety Committee.	