Wyoming Dept of Health - Office of Healthcare Licensi

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	WY0022	A. BUILDING _____ B. WING _____	09/14/2006

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PLATTE COUNTY MEMORIAL NURSING	201 14TH ST WHEATLAND, WY 82201

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEEDED 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	State Rules and Regulations STATE STANDARD Rules and Regulations for Program Administration of Nursing Care Facilities. Chapter 11. Section 5. Organization and Administration. (a) Governing Body. The Nursing Care Facility shall have a governing body which has the legal authority and responsibility to operate the Nursing Care Facility. The governing body shall: (i) Appoint a full-time, on premise, administrator qualified by education, training and experience as established by the Wyoming Board of Nursing Home Administrators. (A) The administrator shall have a current license as a Wyoming Licensed Nursing Home Administrator. This STANDARD is not met as evidenced by: Based on staff interview, review of an Internet database, and review of facility documentation, the governing body failed to appoint an administrator who was licensed by the state of Wyoming. The findings were: During the entrance conference on 9/11/06 at 4:50 PM, the clinical nursing officer (CNO) identified employee #27 as the administrator of the facility. Review of the facility staff listing provided by the facility revealed employee #27 was the administrator. Review of a letter dated 9/6/06 from the Wyoming Board of Nursing Home Administrators provided by the facility showed the board had received the application from employee #27, but did not provide a license. Review of the Wyoming Board of Nursing Home Administrators Internet database	S 000	**S000** Employee # 27 has submitted to the State of Wyoming for consideration of waving the nursing home internship requirement. If accepted, employee #27 will schedule and sit for the Long Term Care Administrator's examination at the earliest possible date. We will work towards getting another Long Term Administrator licensed. To ensure further compliance, we will add this requirement to the official job description of the CEO of the facility. Gavin Carmichael received as temporary license (NHA) on 10/26/06 and is pursuing a permanent license. added per request of Jon Mefford Date Agreed on 10/26/06 10/26/06	Will be Completed within the required 6 mth period from the date of the temporary License issue

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S 000	Continued From page 1 (http://nha.state.wy.us) on 9/12/06 at 6 PM showed employee #27 did not have a license. During an interview on 9/13/06 at 4:35 PM, employee #27 stated he had been acting as the administrator for 60 days. He confirmed he did not have a license.	S 000		