| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING **01 - MAIN BUILD...**<br>B. WING | (X3) DATE SURVEY COMPLETED<br>**03/27/2026** |
|---|---|---|---|

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| **Granite Rehabilitation and Wellness** | **3128 Boxelder Dr , Cheyenne, Wyoming, 82001** |

| (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 |
|---|---|---|---|---|
| S0000<br>Bldg. 01 | General Comments<br><br>A Life Safety Code survey was conducted by Healthcare Licensing and Surveys on 03/26/2026 and 03/27/2026.<br><br>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 Health Care Facilities apply.<br><br>The facility was a fully sprinklered, three story building with a basement of a Type II (222), and Type II (111) construction built in 1966 and 1972. The building was equipped with a supervised automatic wet sprinkler system, and an addressable fire alarm system. The facility had a capacity of 146 certified Medicare and Medicaid beds with a census of 83 residents. | S0000 | | 04/09/2026 |
| S7999<br>Bldg. 01 | Life Safety<br><br>CFR(s): State Miscellaneous<br><br>State Miscellaneous<br><br>This LICENSURE REQUIREMENT is NOT MET as evidenced by:<br><br>Based on observation and staff interview, the facility failed to maintain water temperatures in accordance with the WDH Chapter 3 Construction Rules and Regulations for Healthcare Facilities and the WDH Chapter 11: Program Administration of Nursing Care Facilities. Failure to maintain water temperatures as required could lead to burns on hands or other parts of the body leading to injury or death. The deficiencies were found in a sampling of eleven (11) resident rooms, out of eighty (80) rooms. The findings were:<br><br>Observation on 03/26/2026 at starting 1:38 PM in room 303, found multiple rooms where the temperature at the bathroom hand wash sink was in excess of 110°F (temperatures of 134.4°F, 129°F, 115.3°F, 125.2°F, 129.5°F, 143.2°F, 133.3°F, 137.6°F, 135.1°F, 128.9°F, and 125°F).<br><br>Additional interview with the health team on | S7999 | S7999<br><br>CORRECTIVE ACTION<br><br>A plumber corrected the cold-water flow problem at the main mixing valve on 3/26/26 to correct the fluctuations in water temperatures. Slight adjustments have been made to the boiler temperature by the maintenance director to ensure the appropriate overall temperature at the boiler prior to 5/8/26.<br><br>IDENTIFICATION OF OTHERS<br><br>Residents who use the shower for bathing have a potential to be affected by this practice.<br><br>SYSTEMIC CHANGE<br><br>The Maintenance Director/designee records the temperatures of each shower room and random resident rooms twice daily to validate that the hot water temperatures do not exceed the acceptable | 05/08/2026 |



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

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| S7999<br>Bldg. 01 | Continued from page 1<br>04/07/2026, regarding measurements taken on 03/26/2026 revealed that the shower temperatures on the first floor (10:12AM) and second floor (1:15PM) shower rooms was measured in excess of 120°F (temperatures of 130.5°F and 125.1°F)<br><br>Interview with the facility maintenance manager and regional manager at the time of observation acknowledged the deficiency, and indicated awareness of the requirement.<br><br>Interview with the facility administrator at the time of exit acknowledged the deficiency.<br><br>REF: WDH Chapter 11 Section 6, (a)(iv) | S7999 | Continued from page 1<br>range. Should a temperature be identified as outside the acceptable range it is addressed by the Maintenance Team<br><br>The Maintenance Team was provided in-service training on 3/31/26 by the administrator related to the acceptable water temperatures for both showers and room hot water.<br><br>The staff received in-service training on 3/31/26 from the administrator related validating appropriate water temperatures prior to a shower.<br><br>MONITORING<br><br>The Maintenance Director monitors the hot water temperatures to verify that temperatures are within acceptable range and reports any negative patters or trends to the Quality Assurance Performance Improvement Committee monthly for their review and resolution. These audits will continue for 3 months. If no concerns are identified these audits will be discontinued at that time unless the QAPI Committee deems it prudent to continue. | 05/08/2026 |