STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED **06/18/2026**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Summit Ridge Skilled Nursing & Rehabilitation	**1108 Birch Street , Douglas, Wyoming, 82633**

(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	OPENING COMMENTS Rules and Regulations utilized for this survey are: Rules and Regulations for Program Administration of Nursing Care Facilities, Chapter 11, effective 07/01/2020 Rules and Regulations for Licensure of Nursing Care Facilities, Chapter 19, effective 06/26/2000 A licensure survey was conducted by Healthcare Licensing and Surveys from 6/15/26 to 6/18/26.	S0000		07/11/2026
S2915	Physical Environment CFR(s): Ch 11 Sec 6 (a)(iv) (a) The building(s) of the Nursing Care Facility shall be constructed, arranged and maintained to ensure the health and welfare of all residents. (iv) The facility shall ensure hot water temperatures are adjusted for resident comfort and safety. The water temperature for showers and baths must not exceed 120 degrees Fahrenheit. Hand wash sinks must not exceed 110 degrees Fahrenheit. This LICENSURE REQUIREMENT is NOT MET as evidenced by: Based on observations, staff interview, and policy review, the facility failed to ensure the hot water temperature in hand wash sinks did not exceed 110 degrees Fahrenheit in 4 out of 7 rooms checked for temperature. The findings were: 1. Observations on 6/18/26 at 10:44 AM showed the water temperature at the hand sinks in rooms on the 300 Hall were recorded as follows: Room 310 tested at 112 degrees, Room 301 tested at 123 degrees, Room 302 tested at 118 degrees, and Room 303 tested at 113 degrees. 2. Interview with the maintenance supervisor on 6/18/26 at 10:44 AM revealed he had thought the temperatures of the hand sink should be under 120	S2915	Physical environment; CFR(s): Ch 11 Sec 6 (a)(iv) The facility will ensure that hot water temperatures in hand washing sinks do not exceed 110 degrees Fahrenheit. Corrective Action: All hand washing sink temperatures were adjusted to appropriate temperature on 06/18/26. All residents have the potential to be affected. Systemic Change to prevent Recurrence: Facility Manager and NHA were educated on proper temperature per WDOH regulations. Completion date: 06/18/26 Responsible party: NHA or designee QAPI: Weekly Audits conducted by maintenance team. Audits will be brought to QAPI each month for 3 months or until resolved. Administrator oversees the QAPI process and is ultimately responsible for corrective actions and sustained compliance	07/20/2026

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED **06/18/2026**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Summit Ridge Skilled Nursing & Rehabilitation	**1108 Birch Street , Douglas, Wyoming, 82633**

(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
S2915	Continued from page 1 degrees, and he had learned on 6/16/26 the water temperatures in the hand sink should be "no more than 110 degrees." 3. Review of the facility policy titled "Safe Water Temperatures" last revised 5/26 showed "..5. Water temperatures will be set to a temperature according to the state's allowable maximum water temperature."	S2915		07/20/2026