Healthcare Licensing and Surveys

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ALF018	A. BUILDING: _____ B. WING _____	07/22/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE SUGARLAND RIDGE	1551 SUGARLAND DRIVE SHERIDAN, WY 82801

(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 survey was conducted at your facility on 22 July, 2015 by the office of Healthcare Licensing and Surveys, (HLS). The facility was a three-story, fully sprinklered, building of Type II (111) construction built in 1993. The building was equipped with a supervised, automatic wet sprinkler system and an addressable fire alarm system. The facility had a capacity of 65 licensed beds with a census of 51 residents. Wyoming Department of Health, Rules and Regulations for Licensure of Assisted Living Facilities Chapter 4, Section 10 Life Safety and Electrical Safety. The requirements in the Department of Health Chapter III, Construction Rules for Health Facilities apply. (ii) Assisted Living Facilities operation prior to the effective date of these rules, shall meet the Life Safety Code of the National Fire Protection Association that was in effect at the time the facility was licensed as an Assisted Living Facility. All references are based on the requirements of NFPA 101 Life Safety Code, New Board and Care, 1991 Edition, unless otherwise noted.	S 000		
S8008	NFPA Life Safety - Nfpa Arrange of Means of Egress NFPA 101 Arrangement of Means of Egress This State Rule and Regulation is not met as evidenced by: Based on observation and staff interview, the facility failed to maintain means of egress free of	S8008		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE: Executive Director — (X6) DATE: 8-12-15

STATE FORM 6899 O9LR11 If continuation sheet 1 of 5

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WY Dept of Health
AUG 19 2015
Healthcare Licensing and Surveys

POC Accepted Via Phone Call with Administrator Theresa Hamilton on 8/24/15 at 3:22pm 34354

Healthcare Licensing and Surveys

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S8008	Continued From page 1 all obstructions or impediments to full instant use. The findings were: Observation on 07/22/15 at 1:30 PM revealed the exit discharge leading from the South Dining Room Exit was blocked by a vending machine that was permanently placed in the location. At the time of the observation the Facility Maintenance Manager acknowledge the vending machine was blocking approximately 60% of the sidewalk. Ref: 1994 NFPA 101, Sections 23-3.2.1, 5-7.1, and 5-7.2	S8008	The facility will remove obstruction of the vending machine from the South Dining Room Exit and move to outside kitchen door. 8/14/2015	
S8015	NFPA Life Safety - Nfpa Prot from Hazards NFPA 101 Protection from Hazards This State Rule and Regulation is not met as evidenced by: Based on observation and staff interview, the facility failed to ensure hazardous areas were protected from the corridor with self-closing doors in 1 of 9 smoke compartments. The findings were: 1. Observation on 07/22/15 at 1:22 PM revealed the North Kitchen Door was provided with a self-closing device, but when activated would not fully close and latch the door into its frame. At the time of the observation the Facility Maintenance Manager acknowledged the door would not latch into the frame. 2. Observation on 07/22/15 at 1:35 PM revealed the Main Laundry Door was provided with a	S8015	The facility Maintenance Director has adjusted the door for the North Kitchen and this will be monitored monthly on the TELS system by the Maintenance Director. 8/7/2015	

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S8015	Continued From page 2 self-closing device, but when activated would not fully close and latch the door into its frame. At the time of the observation the Facility Maintenance Manager acknowledged the door would not latch into the frame. Ref: 1994 NFPA 101, Section 23-2.3.2	S8015	The facility Maintenance Director has adjusted the door for the Main Laundry Door and this will be monitored monthly on the TELS system by the Maintenance Director. 8/7/2015	
S8017	NFPA Life Safety - Nfpa Det, Alarm & Comm Systems NFPA 101 Detection, Alarm and Communication Systems This State Rule and Regulation is not met as evidenced by: Based on document review and staff interview, the facility failed to provide documentation identifying a maintenance policy of the fire alarm system. The findings were: Document review and staff interview of the testing and maintenance records on 07/22/15 from 1:45 PM to 2:20 PM confirmed the lack of testing and maintenance policy of the following aspects of the fire alarm system. 1. Supervisory Signal Devices (quarterly test) 2. Water Flow Alarm Devices (quarterly test) 3. Battery Load Voltage Test (semi-annual) Ref: 1994 NFPA 101, Sections 23-2.3.4.1 and 7-6.1.4 1993 NFPA 72, Table 7-3.2 (14) and 7-3.2 (4)	S8017	Fire Alarm system testing for Supervisory Signal Devices changed to quarterly, Water Flow Alarm Devices changed to quarterly, Battery Load Voltage test changed to semi-annual by Regional Maintenance Director via Simplex Grinnell (testing contract). This will be monitored quarterly in Quality Assurance Program. 8/12/2015	
S8027	NFPA Life Safety - Nfpa Emergency Egress & Rel Dr	S8027		

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S8027	Continued From page 3 NFPA 101 Emergency Egress and Relocation Drills This State Rule and Regulation is not met as evidenced by: Based on document review and staff interview, the facility failed to provide fire drills held at unexpected times and at least quarterly on each shift. The findings were: Document review on 07/22/15 from 1:45 PM to 2:20 PM revealed no records of fire drills were available for the last 6 months of 2014. Interview with the Facility Administrator at the time of the record review acknowledged no records were available for review for the last 6 months of 2014. Ref: 1994 NFPA 101, Section 31-7.3 WDH Chapter 12, Section 7	S8027	The facility will ensure that records of fire drills are kept for two years and on hand for timely review when requested. These records will be kept for the current year in the Survey Binder and the past year will be kept in file accessible to review. A monthly review will be done in Quality Assurance meetings to ensure these are done timely and per guidelines. 8/7/2015	
S8030	NFPA Life Safety - Nfpa Miscellaneous NFPA 101 Miscellaneous This State Rule and Regulation is not met as evidenced by: Based on observation and facility staff interview, the facility failed to ensure that racks are provided to protect oxygen cylinders from accidental damage or dislocation in accordance with NFPA 99. The findings were: Observation of Housekeeping room on 07/22/15 at 1:40 PM revealed an H cylinder being stored on the floor without a rack or fastenings. At the time of the observation the Facility Maintenance Manager acknowledged the unsecured cylinder.	S8030	The facility has purchased a heavy duty chain for the H tank in the Housekeeping room. Maintenance Director has attached chain to the cylinder. This will be monitored monthly by Maintenance Director. 8/7/2015	

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S8030	Continued From page 4 Ref: 1993 NFPA 99, Sections 8-3.1.11 and 4-6.2.2.1	S8030		
S8032	IPC Life Safety - Int'l Plumbing Cod This State Rule and Regulation is not met as evidenced by: Based on observation and staff interview, the facility failed to maintain existing plumbing in accordance with the International Plumbing Code. The findings were: Observation of the Kitchen Janitor Sink on 07/22/15 at 1:26 PM revealed that a hose connection to the chemical dispensing system had been installed without a means of backflow prevention. The chemical dispensing system was connected to the faucet discharge via a tee and shut-off valve which disabled the atmospheric vacuum breaker, and created a potential means for system interconnection if the shut-off valve was utilized in lieu of the fixture valves. The Facility Maintenance Manager acknowledged that the fixtures were not provided with an acceptable means of backflow prevention at the time of the observations. Ref: 1999 IPC, Section 604.2 and 608.13	S8032	The facility Maintenance Director has attached a backflow connection to the Kitchen Janitor sink. This will be monitored by Maintenance Director and Dining Services Coordinator. 8/7/2015	