

Healthcare Licensing and Surveys

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ALF005	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/14/2024
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NAME OF PROVIDER OR SUPPLIER PRIMROSE RETIREMENT COMMUNITY OF CA	STREET ADDRESS, CITY, STATE, ZIP CODE 1865 SO BEVERLY STREET CASPER, WY 82601
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(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	<p>General Comments</p> <p>A Life Safety Code survey was conducted by Healthcare Licensing and Surveys on 05/14/2024</p> <p>The facility was a single story fully sprinklered building of Type V (111) construction built in 2003. The building was equipped with a supervised automatic wet sprinkler system, and an addressable fire alarm system. The facility had a capacity of 42 licensed beds with a census of 42 residents.</p> <p>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 operating 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.</p> <p>All references are based on the requirements of the 2000 NFPA 101, Life Safety Code, New Residential Board and Care unless otherwise noted.</p>	S 000		
S8003	<p>NFPA Life Safety - Nfpa Means of Egress Components</p> <p>NFPA 101 Means of Egress Components</p> <p>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 as required by NFPA 101, Life Safety Code. Failure</p>	S8003		

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

TITLE

(X8) DATE

STATE FORM

0889

ZOPO11

If continuation sheet 1 of 4

[Signature]

Executive Director

6/18/2024

This POC was approved on 6/18/24 via phone call w/admin

[Signature]

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S8003	<p>Continued From page 1</p> <p>to maintain means of egress could result in a delay of egress during an emergency leading to injury or death. The deficiency affected one of several means of egress in the facility, and could affect all residents, staff, and visitors. The findings were:</p> <p>Observation on 05/15/2024 at 12:35 PM at the South smoke compartment revealed a set of double fire doors in the exit corridor on magnetic releases attached to the fire alarm system. The doors operated properly when closure was initiated with no initial force. Further observation revealed the doors required more than 30 lbf. of force to open when closed. The forces required to open any door manually in a means of egress shall not exceed 15 lbf to release the latch, 30 lbf to set the door in motion, and 15 lbf to open the door to the minimum required width.</p> <p>Interview with the maintenance manager at the time of observation acknowledged the deficiency, and indicated that he was aware of the requirement.</p> <p>Interview with the executive director at the time of exit acknowledged the deficiency.</p> <p>Ref: 2000 NFPA 101, Ch.7.2.1.4.5</p>	S8003		
S8018	<p>NFPA Life Safety - Nfpa Extinguishment Req</p> <p>NFPA 101 Extinguishment Requirements</p> <p>This State Rule and Regulation is not met as evidenced by: Based document review and staff interview, the facility failed to maintain fire sprinkler systems in</p>	S8018		

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S8018	<p>Continued From page 2</p> <p>accordance with the NFPA 101, Life Safety Code, NFPA 13, Standard for the Installation of Sprinkler Systems, and NFPA 25, Inspection, Testing and Maintenance of Water-Based Fire Protection Systems. Failure to maintain fire sprinkler systems as required could result in injury or death during an emergency. The deficiency affected the entire sprinkler system, and all residents, visitors, and staff. The findings were:</p> <p>Document review on 05/14/2024 starting at 1:40 PM revealed there was no documentation available to demonstrate that the sprinkler system gauges had been replaced or re-calibrated within the last 5 years.</p> <p>Interview with the maintenance manager at the time of observation acknowledged the deficiency, and indicated that he was aware of the requirement.</p> <p>Interview with the executive director at the time of exit acknowledged the deficiency.</p> <p>REF: 2006 NFPA 101 Sec 32.2.3.5.1 and Sec 9.7; 2002 NFPA 13, Section 18.1; 2002 NFPA 25, Table 5.1</p>	S8018		
S8033	<p>IFGC Life Safety - Int'l Fuel Gas Code</p> <p>This State Rule and Regulation is not met as evidenced by: Based on observation and staff interview, the facility failed to protect gas-fired equipment in accordance with NFPA 101, Life Safety Code, and NFPA 54, National Fuel Gas Code. Failure to maintain gas-fired equipment could lead to system damage and failure, resulting in injuries to</p>	S8033		

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S8033	<p>Continued From page 3</p> <p>staff or residents. The deficiency affected the kitchen, and all staff working within. The findings were:</p> <p>Observation on 04/29/2024 at 2:07 PM in the kitchen revealed a gas-fired cooktop. Further observation revealed that the cooktop was on casters, and was not provided with the required restraint to protect the flexible gas piping when the cooktop is moved for service or cleaning. The equipment was also not provided with a means of repeatable replacement when the cooktop is moved for service or cleaning.</p> <p>Interview with the maintenance manager at the time of observation acknowledged the deficiency, and indicated that he was aware of the requirement.</p> <p>Interview with the executive director at the time of exit acknowledged the deficiency.</p> <p>REF: 2000 NFPA 101 Section: 7.1.1; 2006 NFPA 54 Section: Table 110.26(A)(1) Condition 1</p> <p>Ref: 2000 NFPA 101 Sec. 32.3.6.1, 9.1, 9.1.1; 1999 NFPA 54 Sec.</p>	S8033		

**Aging Division
Healthcare Licensing and Surveys
Hathaway Building, Suite 510
2300 Capital Avenue
Cheyenne, WY 82002**

**Provider: Primrose Retirement Community of Casper
1865 S. Beverly
Casper, WY 82609**

ALF#

Survey Completed: May 14th, 2024

S8003 NFPA Means of Egress Components

Local Vendor was contact on 5/30/24 and came over on 6/4/24 to balance the fire doors throughout the community.

This will be checked for, closing and opening of the doors, on a monthly basis during all fire activation by the Property Maintenance Tech and reported to the Quality Assurance team at the meeting monthly. Any deficiencies will be fixed and adjusted by our maintenance team going forward. This will be on going and sustained.

S8018 NFPA 101 Extinguishment Requirements

On 6/4/24 documentation was obtained from our contracted national vendor that the gages in question were fixed on 2/27/2020. This documentation was not provided to the survivor and had to be obtained. We will be having another 5 year sprinkler system inspection in February of 2025. The Executive Director has a binder of fire inspections that will be maintained by the Executive Director and presented at the Quality Assurance Meeting monthly. This will be on going and sustained.

Attached are the documents of the inspection and quote to fix on 2/27/2020.

S8033 IFGC Life Safety Int'l Fuel Gas Code

6/4/24 a Stove Restraining Cable was placed on order. This will be attached to the wall and stove so that it will limit movement by 7/1/24.

Dietary manager will check the function of this cable whenever the stove is moved to clean behind it weekly. This will be discussed monthly in the Quality Assurance Meeting.

Tape has been placed on the kitchen floor 6/6/24 to assure that the stove is place in the correct location for the suppression system to work most effectively.

This will be checked whenever the stove is moved for any reason. This will be observed and checked by the Dietary Manager and staff daily.

Sincerely,

A handwritten signature in black ink, appearing to read "Rob Lempka". The signature is fluid and cursive, with a large initial "R" and "L".

Rob Lempka

Executive Director

Primrose Retirement of Casper