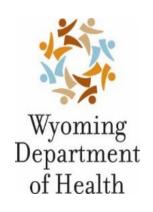
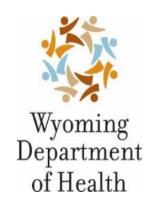


LeadingAge Wyoming May 28, 2025

Laura Hudspeth, SA Director
Pat Davis, Chief, LSC and Construction Branch
Tim Cozad, Chief LTC, Healthcare Surveillance
Branch

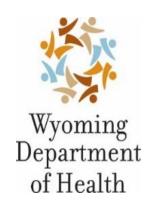


- LSC Educational Opportunities
- Means of Egress
- LSC/EP and Survey Data
- Chapter 3 Construction Rules



Agenda:

- Health Survey Data
- Nurse Aide Training and Testing
- New CMS Regulations Effective 4/28/25



Agenda:

- Incident Database and Reporting
- Users for ePOC and Incident Database
- Past Non-compliance
- CMP Project Information

HEALTHCARE LICENSING AND SURVEYS

May 20, 2025

State Survey Agency Director/ Administrator

EXMT02 Laura Hudspeth, MSc, RD, LD Pos 12110

Business Office

BABO09 Tammy Schmitt Pos 32580

BAAS06 Kaylee Person Pos 00020

BAAS05 Sam Romero Pos 08060

> BAAS05 Vacant Pos 08010

Life Safety & Construction

ENEG13 Pat Davis Pos 22660

BAAS05 Brenda Lyday Pos 08170

ENEG10 Luke Schauermann Pos 11290

> ENEG09 Jason Ross Pos 08200

HSHP09 Matt Langley Pos 08130

LTC Lead Health Care Surveillance HSHP11

Tim Cozad Pos 08210

HSHP10 Vacant Pos 08140

HSHP09 Vacant Pos 08120

HSHP09 Jean Yennie Pos 08180

HSHP09 Cathy Spacklen Pos 08070

HSHP09 Marabeth Kopp Pos 08030

HSHP09 Janelle Conlin Pos 08190

HSHP09 Vacant Pos 08090

CLIA

Jean Yennie

HSHP09 Vacant Pos 08030

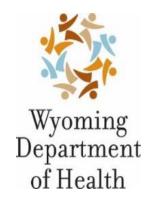
HSHP09 Vacant Pos 08100

HSHP09 Vacant Pos 15760

HSHP09 Vacant Pos 08080

HSHP09 Christine Jarrard Pos 08110

HSHP09 Ally Watson Pos 08040



HLS STAFFING Positions Filled



- Business Office 3/4
- Healthcare Surveillance 7/14
- LSC and Construction- 5/5



Educational Opportunities and Support

Commit to your health.

Facility Managers or Maintenance Directors are encouraged to participate in the Wyoming Society of Healthcare Engineers. Their mission statement reads:

"The Wyoming Society of Healthcare Engineering (WSHE) is an organization dedicated to presenting educational opportunities to promote safety and compliance for Healthcare facilities. The assistance received from the organizations that we are affiliated with such as ASHE, WHA and the Wyoming department of Health, enables our members to provide safe working environments through improved communications and knowledge."



Educational Opportunities and Support, Cont.

- HLS participates in the WSHE annual conference
- HLS provides information regarding the following:
 - CMS updates
 - Building Code updates
 - Updates to HLS Rules and Regulations
 - Technical assistance for items requested in advance
 - Q&A session to address any items from the audience
- Vendors and design professionals participate to provide additional training, product overviews, and networking



NURSING HOME STANDARD SURVEYS AVERAGE # OF LSC DEFICIENCIES

FFY	WYOMING	REGION	NATION
2018	4.0	4.8	4.6
2019	2.9	4.8	4.6
2020	4.1	5.1	4.5
2021	3.5	4.8	4.5
2022	6.0	4.5	4.6
2023	7.3	4.5	4.9
2024	4.0	4.4	5.0
2025 YTD	4.0	4.3	5.0



Nursing Homes Most Frequently Cited Deficiencies LIFE SAFETY CODE FFY24 YEAR

Commit to your health.		
NATIONAL		
Tag #	Description (9,892 Surveys)	% Survey s Cited
	Sprinkler System -	
K0353	Maintenance and Testing	45.1%
	Electrical Systems - Essential	
K0918	Electric System	32.6%
K0321	Hazardous Areas - Enclosure	26.1%
K0363	Corridor - Doors	25.5%
K0345	Fire Alarm System - Testing and Maintenance	25.4%
K0712	Fire Drills	24.3%
K0324	Cooking Facilities	21.7%
K0920	Electrical Equipment - Power Cords and Extens	21.2%
	Subdivision of Building Spaces - Smoke Barrie	16.3%
	Means of Egress - General	15.1%

REGIONAL		
Tag #	Description (388 Surveys)	% Survey s Cited
K0353	Sprinkler System - Maintenance and Testing	57.70%
K0712	Fire Drills	39.40%
K0918	Electrical Systems - Essential Electric System	35.80%
K0345		33.50%
K0321	Hazardous Areas – Enclosure	26.80%
K0324	Cooking Facilities	22.70%
K0521	HVAC	20.60%
K0363	Corridor - Doors	19.60%
K0914	Electrical Systems - Maintenance and Testing	19.30%
K0291	Emergency Lighting	18.60%

WYOMING		
Tag #	Description	% Survey
	(31 Surveys)	s Cited
K0345	Fire Alarm System - Testing and Maintenance	71.00%
100 10	Sprinkler System -	7 210070
K0353	Maintenance and Testing	64.50%
	Electrical Systems - Essential	
K0918	Electric System	48.40%
K0321	Hazardous Areas - Enclosure	29.00%
K0761	Maintenance, Inspection and Testing - Doors	29.00%
	Electrical Systems -	
K0914	Maintenance and Testing	25.80%
K0900	Health Care Facilities Code - Other	19.40%
	Electrical Equipment -	
K0920	Power Cords and Extens	16.10%
K0521	HVAC	16.10%
K0291	Emergency Lighting	12.90%



Nursing Homes Most Frequently Cited Deficiencies EMERGENCY PREPAREDNESS FFY24 YEAR

Commit to your neards.			
NATIONAL			
Tag #	Description (2,603 Surveys)	% Survey s Cited	
E0039	EP Testing Requirements	37.0%	
E0004	Develop EP Plan, Review and Update Annually	23.1%	
E0041	Hospital CAH and LTC Emergency Power	21.2%	
E0015	Subsistence Needs for Staff and Patients	15.4%	
E0037	EP Training Program	13.6%	
E0006	Plan Based on All Hazards Risk Assessment	12.2%	
E0030	Names and Contact Information	9.8%	
E0036	EP Training and Testing	8.8%	
E0026	Roles Under a Waiver Declared by Secretary Development of EP Policies	8.6%	
E0013		7.4%	

REGIONAL		
Tag #	Description	% Survey
	(45 Surveys)	s Cited
E0039	EP Testing Requirements	62.20%
E0004	Develop EP Plan, Review and Update Annually	28.90%
L0004	Subsistence Needs for Staff	28.3070
E0015	and Patients	13.30%
E0037	EP Training Program	8.90%
E0030	Names and Contact Information	8.90%
F0041	Hospital CAH and LTC Emergency Power	6.70%
20041	Policies/Procedures for	0.7070
E0023	Medical Documentation	6.70%
E0029	Development of Communication Plan	4.40%
E0031	Emergency Officials Contact Information	4.40%
	Plan Based on All Hazards	
E0006	Risk Assessment	4.40%

WYOMING		
Description	%	
(7 Surveys)	Survey s Cited	
EP Testing Requirements	57.10%	
Develop EP Plan, Review and Update Annually	42.90%	
Development of Communication Plan	28.60%	
Emergency Officials Contact Information	28.60%	
Hospital CAH and LTC Emergency Power	28.60%	
EP Training Program	14.30%	
Information on		
Occupancy/Needs		
	Description (7 Surveys) EP Testing Requirements Develop EP Plan, Review and Update Annually Development of Communication Plan Emergency Officials Contact Information Hospital CAH and LTC Emergency Power EP Training Program	



Nursing Homes Most Frequently Cited Deficiencies LIFE SAFETY CODE FFY25 YEAR TO DATE

Commit to your health.			
NATIONAL			
Tag #	Description (4,300 Surveys)	% Survey s Cited	
K0353	Sprinkler System - Maintenance and Testing	47.10%	
K0918	Electrical Systems - Essential Electric Syste	32.40%	
K0363	Corridor - Doors	24.90%	
K0345	Fire Alarm System - Testing and Maintenance	24.90%	
K0321	Hazardous Areas - Enclosure	24.40%	
K0712	Fire Drills	24.30%	
K0324	Cooking Facilities	23.90%	
K0920	Electrical Equipment - Power Cords and Extens Subdivision of Building	22.70%	
K0372	Spaces - Smoke Barrie	16.00%	
K0511	Utilities - Gas and Electric	15.40%	

REGIONAL		
Tag #	Description (122 Surveys)	% Survey s Cited
K0353	Sprinkler System - Maintenance and Testing	49.20%
K0918	Electrical Systems - Essential Electric Syste	39.30%
K0712	Fire Drills	34.40%
K0321	Hazardous Areas - Enclosure	29.50%
K0324	Cooking Facilities	26.20%
K0345	Fire Alarm System - Testing and Maintenance	25.40%
K0222	Egress Doors	23.80%
K0291	Emergency Lighting	23.80%
K0363	Corridor - Doors	19.70%
K0355	Portable Fire Extinguishers	18.90%

WYOMING			
Tag #	Description	% Survey	
	(10 Surveys)	s Cited	
K0918	Electrical Systems - Essential Electric Syste	100.00%	
K0345	Fire Alarm System - Testing and Maintenance	60.00%	
K0291	Emergency Lighting	50.00%	
K0321	Hazardous Areas - Enclosure	50.00%	
K0222	Egress Doors Sprinkler System -	40.00%	
K0351	Installation	30.00%	
K0271	Discharge from Exits	20.00%	
K0712	Fire Drills	20.00%	
К0923	Gas Equipment - Cylinder and Container Storag	20.00%	
K0355	Portable Fire Extinguishers	20.00%	



Nursing Homes Most Frequently Cited Deficiencies EMERGENCY PREPAREDNESS FFY25 YEAR TO DATE

NATIONAL		
Tag #	Description	% Survey
	(1,082 Surveys)	s Cited
E0039	EP Testing Requirements	38.8%
E0004	Develop EP Plan, Review and Update Annually	23.1%
E0037	EP Training Program	16.1%
E0041	Hospital CAH and LTC Emergency Power	16.1%
E0015	Subsistence Needs for Staff and Patients	13.9%
E0006	Plan Based on All Hazards Risk Assessment	10.4%
E0013	Development of EP Policies and Procedures	8.9%
E0030	Names and Contact Information	8.9%
E0025	Arrangement with Other Facilities	7.9%
E0007	EP Program Patient Population	7.0%

REGIONAL			
Tag #	Description	% Survey	
	(25 Surveys)	s Cited	
	Develop EP Plan, Review		
E0004	and Update Annually	56.00%	
E0039	EP Testing Requirements	44.00%	
E0037	EP Training Program	16.00%	
F0030	Names and Contact Information	12.00%	
20000	Subsistence Needs for Staff	12.00%	
E0015	and Patients	12.00%	
E0025	Arrangement with Other Facilities	8.00%	
E0009	Local, State, Tribal Collaboration Process	8.00%	
E0006	Plan Based on All Hazards Risk Assessment	8.00%	
E0024	Policies/Procedures- Volunteers and Staffing	8.00%	
	Development of		
E0029	Communication Plan	4.00%	

	WYOMING					
Tag #	% Survey					
<i></i>	(3 Surveys)	s Cited				
E0039	EP Testing Requirements	33.30%				
	Local, State, Tribal					
E0009	Collaboration Process	33.30%				
	Policies/Procedures-					
E0024	Volunteers and Staffing	33.30%				



- Means of Egress Locking of Doors
 - Per the 2006 Life Safety Code
 - (18.2.2.2.4) <u>Doors within a required means of egress shall not be equipped</u> with a latch or lock that requires the use of a tool or key from the egress side, unless otherwise permitted by the following:
 - *Door-locking arrangements without delayed egress shall be permitted in health care occupancies, or portions of health care occupancies, where the clinical needs of the patients require specialized security measures for their safety, provided that staff can readily unlock such doors at all times. (See 18.1.1.1.5 and 18.2.2.2.5.)
 - Unlike delayed-egress locks, there is no restriction on the number of doors in the means of egress that can be locked where the clinical needs of the patients so require.
 - *Delayed-egress locks complying with 7.2.1.6.1 shall be permitted, provided that not more than one such device is located in any egress path.
 - Access-controlled egress doors complying with 7.2.1.6.2 shall be permitted.



- Means of Egress Locking of Doors (Cont).
 - Per the 2006 Life Safety Code
 - (18.2.2.2.5) Doors that are located in the means of egress and are permitted to be locked under other provisions of this chapter shall have provisions made for the rapid removal of occupants by means such as the following:
 - Remote control of locks
 - Keying of all locks to keys carried by staff at all times
 - Other such reliable means available to the staff at all times



- Means of Egress Locking of Doors (Cont).
 - Per the 2012 Life Safety Code
 - (18.2.2.2.4) <u>Doors within a required means of egress shall not be equipped</u> with a latch or lock that requires the use of a tool or key from the egress side, unless otherwise permitted by one of the following:
 - Locks complying with 18.2.2.2.5 shall be permitted.
 - *Delayed-egress locks complying with 7.2.1.6.1 shall be permitted.
 - *Access-controlled egress doors complying with 7.2.1.6.2 shall be permitted.
 - Elevator lobby exit access door locking in accordance
 - with 7.2.1.6.3 shall be permitted.
 - (18.2.2.5) <u>Door-locking arrangements shall be permitted in accordance with</u> either 18.2.2.2.5.1 or 18.2.2.2.5.2.



- Means of Egress Locking of Doors (Cont).
 - Per the 2012 Life Safety Code
 - (18.2.2.2.5.1) * Door-locking arrangements shall be permitted where the clinical needs of patients require specialized security measures or where patients pose a security threat, provided that staff can readily unlock doors at all times in accordance with 18.2.2.2.6.
 - Psychiatric units, Alzheimer units, and dementia units are examples of areas with patients who might have clinical needs that justify door locking. Forensic units and detention units are examples of areas with patients who might pose a security threat. Where Alzheimer or dementia patients in nursing homes are not housed in specialized units, the provisions of 18.2.2.2.5.1 should not apply. (See 18.2.2.2.5.2.)



- Means of Egress Locking of Doors (Cont).
 - Per the 2012 Life Safety Code
 - (18.2.2.2.5.2)* Door-locking arrangements shall be permitted where <u>patient</u> special needs require specialized protective measures for their safety, provided that all of the following criteria are met:
 - Staff can readily unlock doors at all times in accordance with 18.2.2.2.6.
 - A total (complete) smoke detection system is provided throughout the locked space in accordance with 9.6.2.9, or locked doors can be remotely unlocked at an approved, constantly attended location within the locked space.
 - The building is protected throughout by an approved, supervised automatic sprinkler system in accordance with 18.3.5.1.
 - The locks are electrical locks that fail safely so as to release upon loss of power to the device.
 - The locks release by independent activation of each of the following:
 - Activation of the smoke detection system required by 18.2.2.5.2(2)
 - Water flow in the automatic sprinkler system required by 18.2.2.2.5.2(3)



- Means of Egress Locking of Doors (Cont).
 - Per the 2012 Life Safety Code
 - (18.2.2.2.5.2)* Door-locking arrangements shall be permitted where <u>patient</u> <u>special needs require specialized protective measures for their safety</u>, provided that...
 - <u>Pediatric units</u>, <u>maternity units</u>, <u>and emergency departments</u> are examples of <u>areas where patients might have special needs</u> that justify door locking.

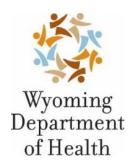


- Means of Egress Locking of Doors (Cont).
 - Summary
 - The verbiage of Sections 18.2.2.4 and 18.2.2.5 differ significantly in the 2006 vs 2012 Life Safety Code.
 - The appendix language, along with interpretation provided by the CMS RO, provide the door locking arrangements that are permissible under the newly adopted 2012 Life Safety Code, and facilities are expected to be in compliance during their next annual survey.



 Amending the Chapter 3 Construction Rules

 ALF/Boarding Home and SNF/NF Life Safety Code Training

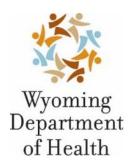


NURSING HOMES TOP 10 CITED HEALTH DEFICIENCIES Standard and Complaint Surveys FFY2024

WYOMING					
	97 Surveys				
Tag	Description	%			
F0600	Free from Abuse and Neglect	23.7%			
F0880	Infection Prevention & Control	18.6%			
F0812	Food Procurement, Store/Prepare/Serve Sanitary	16.5%			
F0656	Develop/Implement Comprehensive Care Plan	11.3%			
F0684	Quality of Care	11.3%			
F0758	Free from Unnec Psychotropic Meds/PRN Use	10.3%			
F0761	Label/Store Drugs and Biologicals	10.3%			
F0677	ADL Care Provided for Dependent Residents	7.2%			
F0689	Free of Accident Hazards/Supervision/Devices	6.2%			
F0883	Influenza and Pneumococcal Immunizations	6.2%			

	REGION					
	1,213 Surveys					
Tag	Description	%				
F0880	Infection Prevention & Control	23.6%				
F0689	Free of Accident Hazards/Supervision/Devices	21.1%				
F0812	Food Procurement, Store/Prepare/Serve Sanitary	17.3%				
F0600	Free from Abuse and Neglect	13.7%				
F0761	Label/Store Drugs and Biologicals	13.3%				
F0684	Quality of Care	10.9%				
F0657	Care Plan Timing and Revision	9.2%				
F0658	Services Provided Meet Professional Standards	9.2%				
F0677	ADL Care Provided for Dependent Residents	8.3%				
F0609	Reporting of Alleged Violations	8.1%				

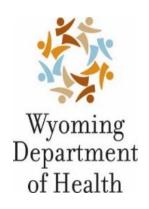
NATION					
	70,053 Surveys				
Tag	Description	%			
50000		0			
F0880	Infection Prevention & Control	9.5%			
F0689	Free of Accident Hazards/Supervision/Devices	9.4%			
F0013	Food Procurement,	7.00/			
FU812	Store/Prepare/Serve Sanitary	7.9%			
F0684	Quality of Care	6.8%			
F0656	Develop/Implement Comprehensive Care Plan	6.0%			
	Label/Store Drugs and Biologicals	5.3%			
	ADL Care Provided for				
F0677	Dependent Residents	4.4%			
	Reporting of Alleged Violations	3.9%			
F0600	Free from Abuse and Neglect	3.9%			
F0695	Respiratory/Tracheostomy Care and Suctioning	3.8%			



NURSING HOMES TOP 10 CITED HEALTH DEFICIENCIES Standard and Complaint Surveys FFY2025 YTD

	WYOMING			REGION		
	31 Surveys		621 Surveys			
Tag	Description	%	Tag	Description	%	
F0880	Infection Prevention & Control	32.3%	F0880	Infection Prevention & Control	20.1%	FO
F0600	Free from Abuse and Neglect	22.6%	F0600	Free from Abuse and Neglect	17.9%	FO
F0758	Free from Unnec Psychotropic Meds/PRN Use	22.6%	F0689	Free of Accident Hazards/Supervision/Devices	17.6%	FO
F0609	Reporting of Alleged Violations	22.6%	F0812	Food Procurement, Store/Prepare/Serve Sanitary	11.0%	FO
F0725	Sufficient Nursing Staff	19.4%	F0609	Reporting of Alleged Violations	10.5%	FO
F0679	Activities Meet Interest/Needs Each Resident	9.7%	F0684	Quality of Care	9.0%	F0
F0656	Develop/Implement Comprehensive Care Plan	9.7%	F 0657	Care Plan Timing and Revision	6.8%	FO
F0689	Free of Accident Hazards/Supervision/Devices	9.7%	F0658	Services Provided Meet Professional Standards	6.6%	FO
F0801	Qualified Dietary Staff	9.7%	F0761	Label/Store Drugs and Biologicals	6.0%	FO
F0684	Quality of Care	9.7%	F0550	Resident Rights/Exercise of Rights	5.6%	FO

NATION					
33,142 Surveys					
Tag	Description	%			
F0880	Infection Prevention & Control	10.7%			
F0689	Free of Accident Hazards/Supervision/Devices	8.8%			
F0812	Food Procurement, Store/Prepare/Serve Sanitary	7.7%			
F0684	Quality of Care	7.0%			
F0656	Develop/Implement Comprehensive Care Plan	5.7%			
F0761	Label/Store Drugs and Biologicals	5.6%			
F0600	Free from Abuse and Neglect	4.0%			
F0755	Pharmacy Srvcs/Procedures/Pharmacist/ Records	4.0%			
F0695	Respiratory/Tracheostomy Care and Suctioning	3.9%			
F0677	ADL Care Provided for Dependent Residents	3.8%			



Complaint Data

ASSISTED LIVING FACILITY							
	FFY19	FFY20	FFY21	FFY22	FFY23	FFY24	FFY25 YTD
TOTAL #	23	33	24	38	40	78	32
SUBSTANTIATED	5 21.7%	11 33.3%	8 33.3%	24 63.2%	15 41.7%	30 46.2%	6 24.0%
UNSUBSTANTIATED	18 78.3%	22 66.7%	16 66.7%	14 36.8%	21 58.3%	35 53.8%	19 76.0%
# PENDING	0	0	0	0	4	13	7



Complaint Data

NURSING HOMES							
	FFY19	FFY20	FFY21	FFY22	FFY23	FFY24	FFY25 YTD
TOTAL #	159	132	111	121	151	227	169
SUBSTANTIATED	60 37.7%	37 28.0%	32 28.8%	39 32.2%	55 36.4%	83 36.7%	52 40.9%
UNSUBSTANTIATED	99 62.3%	95 72.0%	79 71.2%	82 67.8%	96 63.6%	143 63.3%	75 59.0%
# PENDING	0	0	0	0	0	1	42



Complaint Data

NURSING HOMES						
FILED BY:	FFY23	FFY24	FFY25 YTD			
Resident	8	13	8			
Staff/Current & Former	20	35	13			
Anonymous	11	15	29			
Family	62	57	42			
Friend	4	6	5			
Other Agencies	17	20	15			
Incidents	29	81	57			
TOTAL	151	227	169			



NURSING HOME STANDARD SURVEYS AVERAGE # OF HEALTH DEFICIENCIES

FFY	WYOMING	REGION	NATION
2018	7.74	6.49	6.57
2019	7.31	6.65	6.90
2020	6.25	6.22	6.38
2021	4.65	6.30	6.15
2022	5.51	6.34	6.94
2023	5.42	6.02	7.24
2024	4.70	6.70	7.80
2025 YTD	4.60	6.80	7.60



AVERAGE FULL SURVEY FREQUENCY

YEAR	NURSING HOME (MONTHS)
FFY20	11.91
FFY21	21.52
FFY22	15.49
FFY23	12.13
FFY24	13.19
FFY25 YTD	14.47

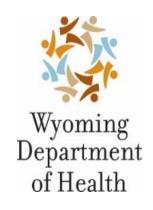


- Nurse Aide Training and Testing
- New CMS Regulations Effective 4/28/25
- Incident Database and Reporting
- Users for ePOC and Incident Database
- Past Non-compliance



NURSING HOME INFORMAL DISPUTE RESOLUTION

FEDERAL FISCAL YEAR	# SURVEYS REQUESTED	# OF TAGS	NO CHANGES	MODIFICATIONS	REMOVED
2018	3	3	0	2	1 (33%)
2019	15	23	7	7	9 (39%)
2020	2	3	1	2	0 (0%)
2021	6	12	3	5	4 (33%)
2022	11	22	7	4	11 (50%)
2023	10	17	7	2	8 (47%)
2024	6	12	6	2	4 (33%)
2025 YTD	4	6	2	1	3 (50%)
TOTAL	57	98	33	25	40 (41%)



CMP Project Information:

https://health.wyo.gov/aging/hls/civil-money-penalty-reinvestment-funds/



THANK YOU!

