

Wyoming Healthcare Licensing and Surveys

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILD... B. WING	(X3) DATE SURVEY COMPLETED 03/27/2026
NAME OF PROVIDER OR SUPPLIER Granite Rehabilitation and Wellness			STREET ADDRESS, CITY, STATE, ZIP CODE 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 Bldg. 01	<p>General Comments</p> <p>A Life Safety Code survey was conducted by Healthcare Licensing and Surveys on 03/26/2026 and 03/27/2026.</p> <p>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.</p> <p>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.</p>	S0000		04/09/2026
S7999 Bldg. 01	<p>Life Safety</p> <p>CFR(s): State Miscellaneous</p> <p>State Miscellaneous</p> <p>This LICENSURE REQUIREMENT is NOT MET as evidenced by:</p> <p>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:</p> <p>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).</p> <p>Additional interview with the health team on</p>	S7999	<p>S7999</p> <p>CORRECTIVE ACTION</p> <p>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.</p> <p>IDENTIFICATION OF OTHERS</p> <p>Residents who use the shower for bathing have a potential to be affected by this practice.</p> <p>SYSTEMIC CHANGE</p> <p>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</p>	05/08/2026

Office of Primary Care and Health Systems Management

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