

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Printed: 01/20/2016
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 50A261	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 01/20/2016
--	---	--	---

NAME OF PROVIDER OR SUPPLIER YAKIMA VALLEY SCHOOL	STREET ADDRESS, CITY, STATE, ZIP CODE 609 SPEYERS ROAD SELAH, WA 98942
---	--

(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
--------------------	--	---------------	---	----------------------

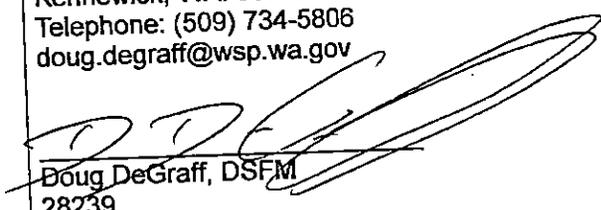
K 000	<p>INITIAL COMMENTS</p> <p>Surveyor: 28239 This report is a result of an unannounced Federal Life Safety re-certification survey conducted at Yakima Valley School located at 609 Speyers Road, Selah, WA on January 20, 2016 by staff from the Washington State Patrol, Fire Protection Bureau, Kennewick Detachment. This inspection was conducted in cooperation with the Survey Team from the Washington State Department of Social and Health Services (DSHS).</p> <p>The 2000 existing edition of the Life Safety Code was utilized for the survey in accordance to 42 CFR 483.70: Requirements for Long Term Care.</p> <p>The Long Term Care 128 bed facility, census of 68 was provided by the Safety Officer. The facility consists of 7 cottages with 2 units in each of type V-1 hour construction. Cottages 101, 102, 103 & 104 are currently unoccupied. Each cottage has a partial basement that is used for mechanical services of the building only. Each cottage is fully sprinkled with an automatic fire alarm system in place. Exit discharge points are to grade have been provided with an all-weather surface and lead to a public way.</p> <p>The facility is found to be in substantial compliance with the Life Safety Code 2000 Edition as adopted by C.M.S.</p> <p>The Surveyor was:</p> <p>Doug DeGraff Deputy State Fire Marshal Life Safety Code Inspector 28239</p> <p>The Surveyor was from:</p>	K 000	<p style="text-align: center;">RECEIVED JAN 26 2016 FIRE PREVENTION DIVISION</p>	
-------	--	-------	---	--

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>Tommy Lincoln</i>	TITLE <i>Superintendent</i>	(X6) DATE <i>1/20/16</i>
---	--------------------------------	-----------------------------

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Printed: 01/20/2016
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 50A261	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 01/20/2016
NAME OF PROVIDER OR SUPPLIER YAKIMA VALLEY SCHOOL		STREET ADDRESS, CITY, STATE, ZIP CODE 609 SPEYERS ROAD SELAH, WA 98942		
(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
K 000	Continued From page 1 Washington State Patrol Fire Protection Bureau 143302 E Law Lane Kennewick, WA. 98837 Telephone: (509) 734-5806 doug.degraff@wsp.wa.gov  Doug DeGraff, DSFM 28239	K 000		

RECEIVED

JAN 26 2016

**FIRE PREVENTION
DIVISION**