

ALPINE VALLEY CARE CENTER
 25 EAST ALPINE DRIVE
 PLEASANT GROVE UT 84062
 STATE'S REGION CODE: 001

PROVIDER #: 465088 FACILITY BEDS
 PHONE NUMBER: (801) 785-3568
 PARTICIPATION DATE: 12/15/1981 CERTIFIED: 52

TYPE ACTION: RECERTIFICATION
 TOTAL: 52
 TYPE OWNERSHIP: NONPROFIT - CORPORATION

COMPLIANCE STATUS: FACILITY MEETS REQUIREMENTS BASED ON AN ACCEPTABLE PLAN OF CORRECTION

RESIDENT CENSUS ON 09/15/2004		LTC ADMISSION/SUSPENSION DATES		TOTAL CERTIFIED BEDS: 52			
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TOTAL:	44	ADMISSION SUSPENDED:		18	18/19	19	ICF/MR
MEDICARE:	7	SUSPENSION RESCINDED:		--	----	--	-----
MEDICAID:	34				52		
OTHER:	3						

CURRENT SURVEY REVISIT DATES - 10/27/2004

PRIOR 3 SURVEY	S/S CODE	PRIOR 2 SURVEY	S/S CODE	PRIOR 1 SURVEY	S/S CODE	CURRENT SURVEY	S/S CODE	PLAN/DATE OF CORRECT	PROGRAM REQUIREMENTS
12/2001		08/2002		10/2003		09/15/2004			
				X	E	X C	G	10/25/2004	REQ F0157-INFORM OF ACCIDENTS/SIG CHANGES/TRANSFER/ETC
						X C	B	10/25/2004	REQ F0253-HOUSEKEEPING & MAINTENANCE SERVICES
				X	B				REQ F0257-COMFORTABLE & SAFE TEMPERATURE LEVELS
		X	E						REQ F0272-COMPREHENSIVE ASSESSMENTS
						X C	G	10/25/2004	REQ F0281-SERVICES PROVIDED MEET PROFESSIONAL STANDARDS
		X	G						REQ F0309-PROVIDE NECESS CARE FOR HIGHEST PRAC WELL BEING
		X	G						REQ F0325-RES MAINTAIN NUTRITIONAL STATUS UNLESS UNAVOIDABL
		X	E						REQ F0361-EMPLOYMENT OF A QUALIFIED DIETITIAN
		X	E						REQ F0363-MENUS MEET NUTRIT NEEDS/PREP IN ADVANCE/FOLLOWED
		X	E			X C	F	10/25/2004	REQ F0371-STORE/PREPARE/DISTRIB FOOD UNDER SANITARY CONDS
		X	B			X C	E	10/25/2004	REQ F0387-FREQUENCY & TIMELINESS OF PHYSICIAN VISIT
X	D	X	D						REQ F0426-FACILITY PROVIDES PHARMACEUTICAL SERVICES
		X	D						REQ F0495-COMPETENCY OF NURSE AIDES WHO WORKED LESS THAN 4
X	D								REQ F0514-CLINICAL RECORDS MEET PROFESSIONAL STANDARDS
		X	B						REQ F0516-FACILITY SAFEGUARDS CLINICAL RECORDS

EDITION OF LSC APPLIED

PRIOR 3 SURVEY	PRIOR 2 SURVEY	PRIOR 1 SURVEY	CURRENT SURVEY	PLAN/DATE OF CORRECTION	LSC DEFICIENCIES - BLDG NO. 01
12/2001	08/2002	10/2003	09/15/2004		
			X C	09/27/2004	K0012-CONSTRUCTION TYPE
	X	X			K0018-CORRIDOR DOORS
	X		X F		K0020-STAIRWAY ENCLOSURES AND VERTICAL SHAFTS
		X			K0029-HAZARDOUS AREAS - SEPARATION
			X C	10/18/2004	K0038-EXIT ACCESS
			X P	09/27/2004	K0052-TESTING OF FIRE ALARM
			X P	09/27/2004	K0054-SMOKE DETECTOR MAINTENANCE
		X			K0056-AUTOMATIC SPRINKLER SYSTEM
X					K0062-SPRINKLER SYSTEM MAINTENANCE
X		X			K0069-COOKING EQUIPMENT
			X P	09/27/2004	K0074-COMBUSTIBLE CURTAINS
X	X				K0130-OTHER

TYPE OF DEFICIENCY	CURRENT SURVEY	PRIOR 1 SURVEY	PRIOR 2 SURVEY	PRIOR 3 SURVEY
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CONDITION REQUIREMENT	0	0	0	0
HEALTH TOTAL	5	2	9	2
LIFE SAFETY CODE	6	4	3	3
LIFE SAFETY CODE + HEALTH	11	6	12	5

COMPLAINT SURVEY INFORMATION

SURVEY DATE	STATUS
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12/05/2001	UNSUBSTANTIATED
04/24/2002	UNSUBSTANTIATED
05/03/2005	UNSUBSTANTIATED

FMS SURVEY INFORMATION

SURVEY DATE	TYPE OF SURVEY
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09/15/2004	OBSERVATIONAL

C=DATE OF CORRECTION N=NO DATE GIVEN P=PLAN OF CORRECTION R=REFUSED TO CORRECT W=WAIVED F=FSSES X=DEFICIENT
 COP = CONDITION REQ = REQUIREMENT