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July 21, 2006

FILE COPY

Coral Holley, Administrator
Creekside Care Center
222 6th Ave West
Jerome, ID 83338

Dear Mr. Holley:

On July 12, 2006, a complaint investigation survey was conducted at Creekside Care Center. The survey was conducted by Patrick Hendrickson, R.N. and Polly Watt-Geier, LSW, and Debra Sholley, LSW. This report outlines the findings of our investigation.

Complaint # ID00001500

Allegation #1: An employee yells at residents.

Findings: Based on interview and record review it could not be determined a identified employee yelled at residents.

Review of the facility's complaint log on July 12, 2006 revealed no documented evidence of a complaint in which the identified employee yelled at residents.

On July 12, 2006 at 1:00 p.m., the facility manager stated the identified employee had worked at the facility for a long time and most of the residents "really like her." Additionally, the facility manager stated she had not received a complaint that the the identified employee had yelled at residents.

On July 12, 2006 between 1:00 p.m. and 1:30 p.m., 4 random residents interviewed stated the employees had not yelled at them and they had not heard any employees yell at any of the other residents.

Conclusion: Unsubstantiated. Although the allegation may have occurred, it could not be validated during the complaint investigation conducted on June 12, 2006.

Allegation #2: An employee was passing medications without being certified and had made several medication errors.

Findings: Based on interview and record review it was determined that employees were certified to pass medications and there were no documented medication errors identified.

On July 12, 2006 three employee's records that assisted with medications in May and June 2006 were reviewed. The records revealed documented evidence that all three employees were certified to assist residents with their medications.

Review of five random residents Medical Administration Records (MAR) for the months of May and June 2006 revealed documented evidence of no medications errors.

Review of the facilities incident and accident reports revealed no documented medication errors.

Review of the facilities complaint log revealed no documented complaints from residents that medication errors were made.

On July 12, 2006 at 1:10 p.m., the facility Licensed Professional Nurse stated all employees that assisted with medications were medication certified. Additionally, she stated and she was unaware of any medication errors.

On July 12, 2006 at 1:30 p.m., the house manager stated that before any employees were allowed to pass medications they must have medication certification. Further, she stated that she was unaware of any medication errors and had received no complaints from residents of medication errors.

Conclusion: Unsubstantiated. Although the allegation may have occurred, it could not be validated during the complaint investigation conducted on July 12, 2006.

Allegation #3: A resident is not getting his food preference.

Findings: Based on interview and record review it was determined the facility offered substitutions for residents who did not want the main entrees.

Review of the facility's complaint log on July 12, 2006 revealed no documented evidence of complaints by residents of the facility not honoring their food preferences.

On July 12, 2006 at 1:00 p.m., the facility nurse stated the facility was on a 6 week meal cycle. She stated the facility offered substitutions of equal nutritional value to

residents when they did not like the main entree.

On July 12, 2006 at 1:24 p.m., the identified resident stated the facility placed cheese on the dinner entrees; which he did not like. He stated the facility did offer substitutions.

On July 12, 2006 between 1:00 p.m. and 1:30 p.m., four random resident were interviewed and had no complaints about the facility's meals or that their food preferences were not respected.

Conclusion: Unsubstantiated. Although it may have occurred, it could not be determined during the complaint investigation conducted on July 12, 2006.

As no deficiencies were cited as a result of our investigation, no response is necessary to this report.Thank you to you and your staff for the courtesies extended to us on our visit.

Sincerely,

PATRICK HENDRICKSON
Team Leader
Health Facility Surveyor
Residential Community Care Program

PH/slc

c: Jamie Simpson, BS, QRMP, MBA, Supervisor, Residential Community Care Program