IDAHO DEPARTMENT OF
HEALTH & WELFARE

JAMES E. RISCH – Governor
RICHARD M. ARMSTRONG – Director

DEBBY RANSOM, R.N., R.H.I.T – Chief
BUREAU OF FACILITY STANDARDS
3232 Elder Street
P.O. Box 83720
Boise, Idaho 83720-0036
PHONE: (208) 334-6626
FAX: (208) 364-1888
E-mail: fsb@idhw.state.id.us

September 14, 2006

FILE COPY

Linda Vestal, Administrator
Guardian Angel Homes - Village Ops - Lewiston
2223 Vineyard Ave
Lewiston, ID 83501

License #: RC-679

Dear Ms. Vestal:

On July 27, 2006, a life safety code survey was conducted at Guardian Angel Homes - Village Ops - Lewiston. As a result of that survey, deficient practices were found. The deficiencies were cited at the following level(s):

- Non-core issues, which are described on the Punch List, and for which you have submitted evidence of resolution.

This office is accepting your submitted evidence of resolution.

Should you have questions, please contact Eric Mundell, Health Facility Surveyor, Facility Fire, Life Safety, and Construction Program, at (208) 334-6626.

Sincerely,

ERIC MUNDELL
Team Leader
Health Facility Surveyor
Facility Fire, Life Safety, and Construction Program

EM/slc

c: Mark Grimes, Supervisor, Facility Fire, Life Safety, and Construction Program

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August 9, 2006

Linda Vestal, Administrator
Guardian Angel Homes - Village Ops - Lewiston
2223 Vineyard Ave
Lewiston, ID 83501

Dear Ms. Vestal:

On July 27, 2006, a Life Safety Code survey was conducted at Guardian Angel Homes - Village Ops - Lewiston. The facility was found to be providing a safe environment and safe, effective care to residents.

The enclosed form, stating no core issue deficiencies were cited during the survey, is for your records only and need not be returned.

Please bear in mind that non-core issue deficiencies were identified on the punch list, a copy of which was reviewed and left with you during the exit conference. The completed punch list form and accompanying proof of resolution (e.g., receipts, pictures, policy updates, etc.) are to be submitted to this office by August 26, 2006.

Should you have any questions about our visit, please contact me at (208) 334-6626.

Sincerely,

MARK GRIMES
Supervisor
Fire/Life Safety & Sanitation Program

MG/slc

Enclosure

Bureau of Facility Standards

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 13R679	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - ENTIRE BUILDING B. WING	(X3) DATE SURVEY COMPLETED 07/27/2006
NAME OF PROVIDER OR SUPPLIER GUARDIAN ANGEL HOMES - VILLAGE OPS - L	STREET ADDRESS, CITY, STATE, ZIP CODE 2223 VINEYARD AVE LEWISTON, ID 83501		

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEEDED 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) COMPLETE DATE
R9999	Initial Comments The facility was found to be in substantial compliance with the fire and life safety standards of the Rules for Residential or Assisted Living Facilities in Idaho. No core deficiencies were cited during the standard fire/life safety survey conducted on July 27, 2006. The surveyor conducting the survey was: Eric Mundell REHS Team Leader Health Facility Surveyor Keith Barkow Health Facility Surveyor	R9999		

Bureau of Facility Standards

TITLE (X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

IDAHO DEPARTMENT OF HEALTH & WELFARE

BUREAU OF FACILITY STANDARDS
P.O. Box 83720
Boise, ID 83720-0036
(208) 334-6626 fax: (208) 364-1888

ASSISTED LIVING
Non-Core Issues Punch List

Facility Name	Physical Address	Phone Number
Guardian Angel Homes	2221 Vineyard Ave	208-743-6500
Administrator	**City**	**ZIP Code**
Linda Vestal	Lewiston, ID	83501
Survey Team Leader	**Survey Type**	**Survey Date**
Eric Mundell / Keith Barkow	Fire + Lifesafety	July 27, 2006

NON-CORE ISSUES

ITEM #	RULE #	DESCRIPTION	DATE RESOLVED
1	IDAPA 16.03. 22.400	Fire and Life Safety Requirements: A) Upon fire alarm test in the Timber and Cottage buildings, The observed and posted procedure for silencing the alarm actually disabled the two systems; subsequently, the fire alarm system could not be re-activated by pull station (manual activation). The procedure essentially cuts off the operation of the fire alarm systems.	8/28/06
		B) Escutcheon plates were missing in SR #3 Craftsman building (loose condition). The Timber house basement had 4 escutcheon plates missing from sprinkler heads.	8/28/06
		C) Stairwells leading to basements were obstructed by boxes and storage along steps/shelves in stairwell.	8/28/06
2	16.03.22.415	Maintenance of Systems: Hot water temperatures at hand washing sinks were 149 and 142 degrees in the Craftsman and Cottage buildings respectively.	8/28/06

Response Required Date: August 27, 2006

Signature of Facility Representative: X [signature]