



IDAHO DEPARTMENT OF  
HEALTH & WELFARE

C.L. "BUTCH" OTTER – GOVERNOR  
RICHARD M. ARMSTRONG – DIRECTOR

TAMARA PRISOCK – ADMINISTRATOR  
DIVISION OF LICENSING & CERTIFICATION  
JAMIE SIMPSON – PROGRAM SUPERVISOR  
RESIDENTIAL ASSISTED LIVING FACILITY PROGRAM  
P.O. Box 83720  
Boise, Idaho 83720-0009  
PHONE: 208-364-1962  
FAX: 208-364-1888

March 17, 2015

Benjamin Knowles, Administrator  
Wynwood at Twin Falls  
1367 Locust Street North  
Twin Falls, Idaho 83301

Provider ID: RC-569

Mr. Knowles:

On January 29, 2015, a state licensure/follow-up/revisit survey was conducted at Wynwood at Twin Falls. 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.

Your submitted evidence of resolution is being accepted by this office. Please ensure the corrections you identified are implemented for all residents and situations, and implement a monitoring system to make certain the deficient practices do not recur.

Thank you for your work to correct these deficiencies. Should you have questions, please contact Matt Hauser, QMRP, Health Facility Surveyor, Residential Assisted Living Facility Program, at (208) 364-1962.

Sincerely,

MATT HAUSER, QMRP  
Team Leader  
Health Facility Surveyor

MH/sc

cc: Jamie Simpson, MBA, QMRP Supervisor, Residential Assisted Living Facility Program



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P.O. Box 83720  
Boise, Idaho 83720-0009  
EMAIL: ralf@dhw.idaho.gov  
PHONE: 208-364-1962  
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February 4, 2015

CERTIFIED MAIL #: 7007 3020 0001 4050 8746

Benjamin Knowles, Administrator  
Wynwood at Twin Falls  
1367 Locust Street North  
Twin Falls, Idaho 83301

Mr. Knowles:

On January 29, 2015, a state licensure/follow-up survey was conducted by Department staff at Wynwood at Twin Falls. The facility was cited with two repeat non-core issue deficiencies for failing to develop interventions for behaviors and failing to review the effectiveness of interventions implemented.

**EVIDENCE OF RESOLUTION:**

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 following administrative rule for Residential Care or Assisted Living Facilities in Idaho (IDAPA 16.03.22) describes the requirements for submitting evidence that the non-core issue deficiencies have been resolved:

**910. Non-core Issues Deficiency.**

**01. Evidence of Resolution.** *Acceptable evidence of resolution as described in Subsection 130.09 of these rules, must be submitted by the facility to the Licensing and Survey Agency. If acceptable evidence of resolution is not submitted within sixty (60) days from when the facility was found to be out of compliance, the Department may impose enforcement actions as described in Subsection 910.02.a through 910.02.c of these rules.*

The two (2) non-core issue deficiencies must be corrected and evidence (including but not limited to receipts, pictures, completed forms, records of training) must be submitted to this office by **February 28, 2015**.

**CIVIL MONETARY PENALTIES**

Of the two (2) non-core issue deficiencies identified on the punch list, two (2) were repeat punches. Both of the repeat deficiencies were cited on both of the two (2) previous surveys, 12/29/2009 and 3/6/2014.

The following administrative rules for Residential Care or Assisted Living Facilities in Idaho give the Department the authority to impose a monetary penalty for this violation:

**IDAPA 925. ENFORCEMENT REMEDY OF CIVIL MONETARY PENALTIES.**

**01. Civil Monetary Penalties.** Civil monetary penalties are based upon one (1) or more deficiencies of noncompliance. Nothing will prevent the Department from imposing this remedy for deficiencies which existed prior to survey or complaint investigation through which they are identified. Actual harm to a resident or residents does not need to be shown. A single act, omission or incident will not give rise to imposition of multiple penalties, even though such act, omission or incident may violate more than one (1) rule.

**02. Assessment Amount for Civil Monetary Penalty.** When civil monetary penalties are imposed, such penalties are assessed for each day the facility is or was out of compliance. The amounts below are multiplied by the total number of occupied licensed beds according to the records of the Department at the time noncompliance is established.

*b. Repeat deficiency is ten dollars (\$10). (Initial deficiency is eight dollars (\$8)).*

For the dates of 10/31/2014 through 1/29/2015:

| Penalty | Number of Deficiencies | Times number of Occupied Beds | Times Number of days of non-compliance | Amount of Penalty |
|---------|------------------------|-------------------------------|--|-------------------|
| \$10.00 | 2                      | 69                            | 90                                     | \$ 124,200        |

Maximum penalties allowed in any ninety-day period per IDAPA 16.03.22.925.02.c:

| # of Occupied Beds in Facility | Initial Deficiency | Repeat Deficiency |
|--------------------------------|--------------------|-------------------|
| 3-4 Beds                       | \$1,440            | \$2,880           |
| 5-50 Beds                      | \$3,200            | \$6,400           |
| 51-100 Beds                    | \$5,400            | \$10,800          |
| 101-150 Beds                   | \$8,800            | \$17,600          |
| 151 or More Beds               | \$14,600           | \$29,200          |

Your facility had 69 occupied beds at the time of the survey. Therefore, your maximum penalty is: \$10,800.

**Send payment of \$10,800 by check or money order, made payable to:**

**Licensing and Certification**

Mail your payment to:

**Licensing and Certification - RALF  
PO Box 83720  
Boise, ID 83720-0009**

Payment must be received in full within 30 calendar days from the date this notice is received. Interest accrues on all unpaid penalties at the legal rate of interest for judgments. Failure of a facility to pay the entire penalty, together with any interest, is cause for revocation of the license.

## ADMINISTRATIVE REVIEW

You may contest the civil monetary penalty by filing a written request for administrative review pursuant to IDAPA 16.05.03.300, which states: **the request must be signed by the licensed administrator of the facility, identify the challenged decision, and state specifically the grounds for your contention that this decision is erroneous.** The request must be received **no later than twenty-eight (28) days after this notice was mailed.** Any such request should be addressed to:

**Tamara Prisock, Administrator  
Division of Licensing and Certification - DHW  
3232 Elder Street  
P.O. Box 83720  
Boise, ID 83720-0036**

Upon receipt of a written request that meets the requirements specified in IDAPA 16.05.03.300, an administrative review conference will be scheduled and conducted. The purpose of the conference is to clarify and attempt to resolve the issues. A written review decision will be sent to you within thirty (30) days of the date of the conclusion of the administrative review conference.

If the facility fails to file a request for administrative review within the time period, this decision shall become final.

Division of Licensing and Certification staff is available to assist you in determining appropriate corrections and avoiding further enforcement actions. Please contact our office at (208) 364-1962 if we may be of assistance, or if you have any questions.

Sincerely,



JAMIE SIMPSON, MBA, QMRP  
Program Supervisor  
Residential Assisted Living Facility Program

JS/sc



|   |                          |  |                                 |
|---|--------------------------|--|---------------------------------|
| Facility<br>WYNWOOD AT TWIN FALLS             | License #<br>RC-569      | Physical Address<br>1367 LOCUST STREET NORTH | Phone Number<br>(208) 735-0700  |
| Administrator<br>Ben Knowles                  | City<br>TWIN FALLS       | ZIP Code<br>83301                            | Survey Date<br>January 29, 2015 |
| Survey Team Leader<br>Matt Hauser             | Survey Type<br>Follow-up | <b>RESPONSE DUE:</b><br>February 28, 2015    |                                 |
| Administrator Signature<br><i>Ben Knowles</i> | Date Signed<br>1-29-15   |  |                                 |

**NON-CORE ISSUES**

| Item # | IDAPA Rule # | Description   | Department Use Only |          |
|--------|--------------|---|---------------------|----------|
|        |              |   | EOR Accepted        | Initials |
| 1      | 225.02.a     | The facility did not develop interventions for Resident #6's behaviors such as hitting and kicking. ***Previously cited on 12/29/09 and 3/6/14***     | 3/4/15              | MB       |
| 2      | 225.02.c     | The facility did not review the effectiveness of interventions implemented for Resident #6's behaviors. ***Previously cited on 12/29/09 and 3/6/14*** | 3/4/15              | MB       |
| 3      |              |   |                     |          |
| 4      |              |   |                     |          |
| 5      |              |   |                     |          |
| 6      |              |   |                     |          |
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| 18     |              |   |                     |          |
| 19     |              |   |                     |          |