



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

April 22, 2015

Carissa Bulletts, Administrator
Peak Village
1035 Curlew Drive
Ammon, Idaho 83406

Provider ID: RC-1051

Ms. Bulletts:

On March 12, 2015, a state licensure/follow-up/revisit survey and complaint investigation were conducted at Peak Village. 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 Maureen McCann, RN, Health Facility Surveyor, Residential Assisted Living Facility Program, at (208) 364-1962.

Sincerely,

MAUREEN MCCANN, RN
Team Leader
Health Facility Surveyor

MM/sc

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



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March 23, 2015

Carissa Bulletts, Administrator
Peak Village
1035 Curlew Drive
Ammon, Idaho 83406

Provider ID: RC-1051

Ms. Bulletts:

On March 12, 2015, a follow-up visit to the complaint investigation survey of August 18, 2014, was conducted at Peak Village. The core issue deficiencies issued as a result of the August 18, 2014, survey have been corrected.

Should you have questions, please contact me at (208) 364-1962.

Sincerely,

MAUREEN MCCANN, RN
Health Facility Surveyor
Residential Assisted Living Facility Program

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March 23, 2015

Carissa Bullets, Administrator
Peak Village
1035 Curlew Drive
Ammon, Idaho 83406

Provider ID: RC-1051

Ms. Bullets:

An unannounced, on-site complaint investigation survey was conducted at Peak Village on March 12, 2015. During that time, observations, interviews or record reviews were conducted with the following results:

Complaint # ID00006631

Allegation: The facility did not notify Licensing and Certification when residents sustained injuries.

Findings: Substantiated. The facility was issued a deficiency at IDAPA 16.03.22.350.07 for not notifying Licensing and Certification after an identified resident sustained a leg fracture. The facility was required to submit evidence of resolution within 30 days.

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, on March 12, 2015. The completed punch list form and accompanying evidence of resolution (e.g., receipts, pictures, policy updates, etc) are to be submitted to this office within thirty (30) days from the exit date.

If you have questions or concerns regarding our visit, please call us at (208) 364-1962. Thank you for the courtesy and cooperation you and your staff extended to us while we conducted our investigation.

Sincerely,

MAUREEN MCCANN, RN
Health Facility Surveyor
Residential Assisted Living Facility Program

MM/sc

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