



IDAHO DEPARTMENT OF
HEALTH & WELFARE

C.L. "BUTCH" OTTER – Governor
RICHARD M. ARMSTRONG – Director

TAMARA PRISOCK – ADMINISTRATOR
DIVISION OF LICENSING & CERTIFICATION
DEBRA RANSOM, R.N., R.H.I.T., Chief
BUREAU OF FACILITY STANDARDS
3232 Elder Street
P.O. Box 83720
Boise, ID 83720-0009
PHONE 208-334-6626
FAX 208-364-1888

Jeffery Mikesell, Administrator
Rose Terrace Country Homes
PO Box 177
Spirit Lake, ID 83869

License #: RC-807

Dear Mr. Mikesell:

On July 23, 2015, a Fire Life Safety Survey was conducted at Rose Terrace Country Homes. As a result of that survey, deficient practices were found. The deficiencies were cited at the following level:

- 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 plan of correction and evidence of resolution.

Should you have questions, please contact Sam Burbank, Health Facility Surveyor, Facility Fire Safety and Construction Program, at (208) 334-6626, option 3.

Sincerely,

SAM BURBANK
Health Facility Surveyor
Facility Fire Safety & Construction Program

SB/lj



IDAHO DEPARTMENT OF
HEALTH & WELFARE

C.L. "BUTCH" OTTER – Governor
RICHARD M. ARMSTRONG – Director

TAMARA PRISOCK – ADMINISTRATOR
DIVISION OF LICENSING & CERTIFICATION
DEBRA RANSOM, R.N., R.H.I.T., Chief
BUREAU OF FACILITY STANDARDS
3232 Elder Street
P.O. Box 83720
Boise, ID 83720-0009
PHONE 208-334-6626
FAX 208-364-1888

August 4, 2015

Jeffery Mikesell, Administrator
Rose Terrace Country Homes
5672 West Rhode Island
Spirit Lake, ID 83869

Dear Mr. Mikesell:

On July 23, 2015, a Fire Life Safety Survey was conducted at Rose Terrace Country Homes. The facility was found to be providing a safe environment for its residents.

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

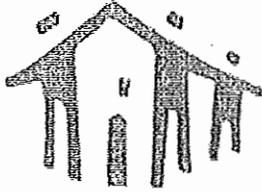
Please bear in mind that non-core issue deficiencies were identified on the punch list, a copy of which was reviewed and left with you during the exit conference. The completed punch list form and accompanying evidence of resolution (e.g., receipts, pictures, policy updates, etc.) are to be submitted to this office by August 24, 2015.

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

Sincerely,

MARK P. GRIMES, Supervisor
Facility Fire Safety & Construction Program

MPG/lj
Enclosure



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 FACILITIES PROGRAM
P.O. Box 83720
Boise, Idaho 83720-0009
Email: ralf@dhw.idaho.gov
PHONE (208) 364-1962
FAX (208) 364-1888

Punch Items

Survey Date: 07/23/2015

16.03.22.405.01.a. Electrical Installations and Equipment.

Electrical installations and equipment must comply with applicable local or state electrical requirements to include the following: Equipment designed to be grounded must be maintained in a grounded condition; and

1) Loose, open exposed wire from dishwasher removal 2) Broken emergency light at rear dining

16.03.22.405.03. Medical Gases.

Handling, use and storage of medical gas must be according to NFPA Standard 99, Standard for Health Care Facilities, 2003 Edition.

Unsecured oxygen cylinder in Room #9

