



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

September 29, 2015

Yvonne Yates, Administrator  
Aarenbrooke Place-Cory Lane, Ashley Manor LLC  
9327 Cory Lane  
Boise, Idaho 83704

Provider ID: RC-718

Ms. Yates:

A complaint investigation was conducted at Aarenbrooke Place-Cory Lane, Ashley Manor LLC between August 12, 2015 and August 13, 2015. 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 Gloria Keathley, LSW, Health Facility Surveyor, Residential Assisted Living Facility Program, at (208) 364-1962.

Sincerely,

GLORIA KEATHLEY, LSW  
Team Leader  
Health Facility Surveyor

GK/sc

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



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August 19, 2015

Yvonne Yates, Administrator  
Aarenbrooke Place-Cory Lane, Ashley Manor LLC  
9327 Cory Lane  
Boise Idaho 83704

Provider ID: RC-718

Yvonne Yates:

An unannounced, on-site follow-up to non-core deficiencies and complaint investigations were conducted at Aarenbrooke Place-Cory Lane, Ashley Manor LLC between August 12, 2015 and August 13, 2015. During that time, observations, interviews, and record reviews were conducted with the following results:

**Complaint # ID00007045**

**Allegation #1:** The facility was not maintained in a clean and sanitary manner.

**Findings #1:** Substantiated. However, the facility was not cited as they acted appropriately by providing training and supervision to staff to ensure the facility was being maintained in a clean and sanitary manner.

**Allegation #2:** The food was not palatable.

**Findings #2:** Substantiated. However, the facility was not cited as they corrected the system prior to the complaint investigation and follow up survey by hiring a new dietary manager and retraining kitchen staff.

**Allegation #3:** Residents' were not treated with dignity and respect.

**Findings #3:** Substantiated. However, the facility was not cited as they acted appropriately by terminating the employee after residents' and other facility employees complained. However, the facility was issued a deficiency at IDAPA 16.03.22.350.02 for the former administrator not completing a written investigation within 30 days, when a resident complained about the employee. The facility also received a deficiency at IDAPA 16.03.22.350.05 for the former administrator not reporting an incident to Adult

Yvonne Yates, Administrator  
August 19, 2015  
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Protection. 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 August 13, 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,



GLORIA KEATHLEY, LSW  
Health Facility Surveyor  
Residential Assisted Living Facility Program

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August 19, 2015

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9327 Cory Lane  
Boise Idaho 83704

Provider ID: RC-718

Ms. Yates:

An unannounced, on-site follow-up to non-care deficiencies and complaint investigations were conducted at Aarenbrooke Place-Cory Lane, Ashley Manor LLC between August 12, 2015 and August 13, 2015. During that time, observations, interviews, and record reviews were conducted with the following results:

**Complaint # ID00007004**

**Allegation #1:** Facility employees did not have infection control training.

**Findings #1:** Substantiated. The facility was issued a deficiency at IDAPA 16.03.22.625.03.i for staff not having documentation of infection control training. The facility was required to submit evidence of resolution within 30 days.

**Allegation #2:** The facility did not follow proper infection control measures when kitchen towels appeared dirty looking and gray.

**Findings #2:** Unsubstantiated. This does not mean the incident did not take place; it only means that the allegation could not be proven."

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 August 13, 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,

GLORIA KEATHLEY, LSW  
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Residential Assisted Living Facility Program

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