



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

October 23, 2015

Wendi Lounsbury, Administrator
Brookdale Coeur d'Alene
205 East Anton Avenue
Coeur d'Alene ID 83815

License #: RC-771

Dear Ms. Lounsbury:

On September 25, 2015, a Fire Life Safety Survey was conducted at Brookdale Coeur d'Alene. 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 Nate Elkins, Health Facility Surveyor, Facility Fire Safety and Construction Program, at (208) 334-6626, option 3.

Sincerely,

Nate Elkins
Health Facility Surveyor
Facility Fire Safety & Construction Program

NE/lj



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October 2, 2015

Steve Holloway, Administrator
Brookdale of Coeur d'Alene
205 East Anton Avenue
Coeur d'Alene, ID 83815

Dear Mr. Holloway:

On September 25, 2015, a Fire Life Safety Survey was conducted at Brookdale Coeur d'Alene. 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.

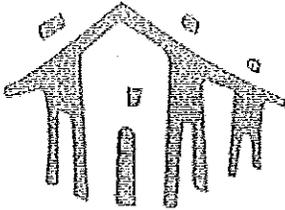
Please bear in mind that non-core issue deficiencies were identified on the punch list, a copy of which was reviewed and left with you during the exit conference. The completed punch list form and accompanying evidence of resolution (e.g., receipts, pictures, policy updates, etc.) are to be submitted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



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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: 09/25/2015

16.03.22.415.01. Maintenance of Equipment and Systems.

The facility must assure that all equipment and systems are properly maintained to assure the safety of the residents.

- 1.) Sprinkler escutcheons missing near reception desk area and maintenance room on first floor.
- 2.) No specific documentation stating emergency lighting system is being tested annually for 90 minutes.
- 3.) Multiple exit signs not operational found throughout facility
- 4.) Emergency exit lights not operational near room 202 and in the dining room.

16.03.22.405.05. Structure, Maintenance, Equipment to Assure Safety.

The facility must be structurally sound, maintained, and equipped to assure the safety of residents, personnel, and the public including:

- 1.) Door to activities room on first floor does not self close and latch properly.
- 2.) Door to laundry room that housed combustible materials was not on a self closure.
- 3.) Maintenance shop door broken on bottom deteriorating the rating of the door.
- 4.) Smoke doors located in the middle stairwell leading to second floor corridor do not close properly (latch side of the door closes before the astragal side of the door)
- 5.) Door to Residential Care Directors office does not close properly and appeared to be damaged.

16.03.22.415.05. Automatic Fire Extinguishing System Service and Testing.

All automatic fire extinguishing systems must be inspected, tested, and serviced at least annually by a sprinkler system contractor licensed by the Idaho State Fire Marshal's office.

Multiple loaded sprinkler heads found throughout the facility.

16.03.22.415.03.d. Portable Fire Extinguisher Service and Testing.

Each extinguisher gauge, if provided, shows a charged condition; and

Fire extinguishers located in the elevator rooms are not being inspected monthly and signed off.

16.03.22.415.01. Maintenance of Equipment and Systems.

The facility must assure that all equipment and systems are properly maintained to assure the safety of the residents.

heat detector located in second floor HVAC room appeared to be damaged and not operational.

16.03.22.410.02. Fire Drills.

All personnel and residents must participate in a minimum of one (1) fire drill per shift per quarter. Fire drills must be unannounced.

Fire drills not being conducted one per shift per quarter. (Missing documentation for 1st through 3rd quarter night (NOC) shifts. Missing 3rd quarter AM & PM shifts)

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.

Found unsecured oxygen bottle in room 310



Facility Name Brookdale	Physical Address 205 E. Anton	Phone Number 208-667-6490
Administrator Steve Holloway	City Coeur D'Alene	ZIP Code 83815
Survey Team Leader Nate Elkins	Survey Type Fire Life Safety	Survey Date 9-25-15

NON-CORE ISSUES

ITEM #	RULE #	DESCRIPTION	DATE RESOLVED	L & C USE
1	415.01	1) Sprinkler escutcheons missing near reception desk area + Maintenance room on 1st floor	10/22/15	NE
		2) No specific documentation stating Emergency lighting system is being tested annually	10/22/15	NE
		3) Multiple Exit Signs not operational	10/21/15	NE
		4) Emergency lighting not operational near rm 202 / Dining rm		
2	405.05	- Door to Activities Room 1st floor does not close & latch properly	10/15/15	NE
		- Door to laundry room 1st floor not on a self-closure	10/21/15	NE
		- Maintenance Shop door broken on bottom degrading the rating	10/22/15	NE
		- Smoke doors in middle stairwell on second floor do not close properly (the astragal side closes after the latch side)	10/14/15	NE
		- Door to Residential Care Director office does not close properly	10/21/15	NE
3	415.05	Multiple loaded sprinkler heads found throughout facility	10/12/15	NE
4	415.03	Fire Extinguishers located in Elevator rooms are not be inspected monthly	10/1/15	NE

Response Required Date 10-26-15	Signature of Facility Representative 	Date Signed 9/25/15
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NON-CORE ISSUES

ITEM #	RULE #	DESCRIPTION	DATE RESOLVED	L & C USE
5	415.01	Heat detector in 2nd floor HVAC Room appeared to be damaged and not operational	10/20/15	NE
6	410.02	Fire Drills not being conducted 1 per shift per quarter (Missing documentation for 1st through 3rd quarter NOC shifts + 3rd quarter AM + PM shifts)	10/22/15	NE
7	405.03	Unsecured oxygen bottle found in RM 310	10/17/15	NE

Response Required Date 10-26-15	Signature of Facility Representative 	Date Signed 10/25/15
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