



IDAHO DEPARTMENT OF
HEALTH & WELFARE

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April 19, 2016

Rex Redden, Administrator
Idaho Falls Group Home #3 Periska
P.O. Box 50457
Idaho Falls, ID 83405-0457

Provider #13G045

Dear Mr. Redden:

An unannounced on-site complaint investigation was conducted from April 11, 2016 to April 13, 2016 at Idaho Falls Group Home #3 Periska. The complaint allegation, findings, and conclusion are as follows:

Complaint #ID00007280

Allegation: The facility failed to maintain a homelike environment, including replacing or repairing damaged furnishings.

Findings: During the investigation, observations and staff interviews were conducted, and facility damage report records were reviewed with the following results:

Observations were conducted at the facility on 4/11/16 and 4/12/16 for a cumulative 1 hour. During those times, the facility was noted to be clean with homelike décor including artwork on the walls and photos of individuals residing at the facility framed and mounted on the walls of the main living area. Additionally, individuals' bedrooms were observed to be decorated and have personal items displayed.

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In the main living area of the facility there was one overstuffed chair, the arms of which were broken down. The Quality Assurance Manager (QAM), who was present during the observations, stated the arms were broken when a staff member sat on them. The QAM stated a damage report had been completed to have the chair replaced.

The facility's damage reports for 1/1/16 - 4/12/16 were reviewed. Each damage report indicated the date the damage to the facility structure or furnishings were noted, the date the form was reviewed by the QAM and submitted to the main office, and a check mark indicating the item had been repaired or replaced.

One damage report, dated 4/10/16, documented the damage to the overstuffed chair noted during observation. The facility's Financial and Personnel Coordinator was interviewed, on 4/12/16 at 1:57 p.m. The Financial and Personnel Coordinator stated general turn-around time was a couple of days for damage reports, but more expensive items such as chairs or couches may take a bit more time. The Financial and Personnel Coordinator stated the facility was looking for a chair that would be more durable than the one at the facility that had broken.

The facility was observed to have a homelike environment, and it could not be determined the facility was not replacing or repairing furnishings as needed. Therefore, the allegation was unsubstantiated and no deficient practice was identified.

Conclusion: Unsubstantiated. Lack of sufficient evidence.

As none of the allegations were substantiated, no response is necessary. Thank you for the courtesies and assistance extended to us during our visit.

Sincerely,



MICHAEL CASE
Health Facility Surveyor
Non-Long Term Care



NICOLE WISENOR
Co-Supervisor
Non-Long Term Care

MC/pmt