December 7, 2016

Rick Myers, Administrator
Life Care Center of Sandpoint
1125 North Division Street
Sandpoint, ID 83864-2148

Provider #: 135127

RE: FACILITY FIRE SAFETY & CONSTRUCTION SURVEY REPORT COVER LETTER

Dear Mr. Myers:

On November 29, 2016, a Facility Fire Safety and Construction survey was conducted at Life Care Center of Sandpoint by the Bureau of Facility Standards/Department of Health & Welfare to determine if your facility was in compliance with State Licensure and Federal participation requirements for nursing homes participating in the Medicare and/or Medicaid programs. Your facility was found to be in substantial compliance with Federal regulations during this survey.

Enclosed is a Statement of Deficiencies/Plan of Correction, Form CMS-2567, which states that the facility complies with the requirements of CFR 42, 483.70(a) of the federal requirements. This form is for your records only and does not need to be returned.

Thank you for the courtesies extended to us during the survey. If you have any questions, please contact this office at (208) 334-6626, option 3.

Sincerely,

[Signature]
Nate Elkins, Supervisor
Facility Fire Safety and Construction

NE/lj
Enclosures
The facility is single story, 55,000 square foot structure of Type V (111) construction that was completed in October of 1997. The building is protected throughout by an automatic fire extinguishing system and a fire alarm system with smoke detection. Currently the facility is licensed for 124 SNF/NF beds.

The facility was found to be in substantial compliance during the annual fire/life safety survey conducted on November 29, 2016. The facility was surveyed under the LIFE SAFETY CODE, 2012 Edition, Existing Health Care Occupancy, in accordance with 42 CFR 483.70.

The Survey was conducted by:

Linda Chaney
Health Facility Surveyor
Facility Fire Safety and Construction

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.