On April 26, 2017, an off-site follow-up survey of your facility was conducted to verify correction of deficiencies noted at the survey of March 1, 2017. Kindred Nursing and Rehabilitation - Nampa was found to be in substantial compliance with federal health care regulations as of April 13, 2017.

The surveyor conducting the follow-up was Loretta Todd, R.N.
**STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION**

**A. BUILDING:** ________________  **B. WING:** ________________

**STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION**

**NAME OF PROVIDER OR SUPPLIER:** KINDRED NURSING AND REHABILITATION - Nampa

**STREET ADDRESS, CITY, STATE, ZIP CODE:** 404 NORTH HORTON STREET, Nampa, ID 83651

**MULTIPLE CONSTRUCTION B. WING:** ________________

**DATE SURVEY COMPLETED:** 04/26/2017

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### SUMMARY STATEMENT OF DEFICIENCIES

#### IDs and Prefixes

<table>
<thead>
<tr>
<th>ID</th>
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#### Deficiency Details

**16.03.02 INITIAL COMMENTS**

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**LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE**

Electronically Signed

04/27/17