IDAHO DEPARTMENT OF
# HEALTH & WELFARE

C.L. "BUTCH" OTTER – Governor
RICHARD M. ARMSTRONG – Director

DEBBY RANSOM, R.N., R.H.I.T – Chief
BUREAU OF FACILITY STANDARDS
3232 Elder Street
P.O. Box 83720
Boise, Idaho 83720-0009
PHONE: (208) 334-6626
FAX: (208) 364-1888
E-mail: fsb@dhw.idaho.gov

June 26, 2012

Dawn Lindsay-Hohrein, Administrator
Almost Home
1081 Fairwood Court
Meridian, Idaho 83646

License #: RC-774

Dear Ms. Lindsay-Hohrein:

On May 17, 2012, a Fire Life Safety Survey was conducted at Almost Home 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 evidence of resolution.

Should you have questions, please contact Taylor Barkley, Health Facility Surveyor, Facility Fire Safety and Construction Program, at (208) 334-6626.

Sincerely,

Taylor Barkley
Health Facility Surveyor
Facility Fire Safety & Construction Program

TB/lj

c: Mark Grimes, Supervisor, Facility Fire Safety & Construction Program

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May 24, 2012

Dawn Lindsay-Hohrein, Administrator
Almost Home
1081 Fairwood Court
Meridian, Idaho 83646

Dear Ms. Lindsay-Hohrein:

On May 17, 2012, a Fire Life Safety Survey was conducted at Almost Home. 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 June 17, 2012.

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

Bureau of Facility Standards

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING 01 - ENTIRE BUILDING<br>B. WING _____ | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 13R774 | | 05/17/2012 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| ALMOST HOME, LLC | 1081 FAIRWOOD COURT<br>MERIDIAN, ID 83646 |

| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) | ID PREFIX TAG | PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) | (X5) COMPLETE DATE |
|---|---|---|---|---|
| R 000 | Initial Comments<br><br>The facility was found to be in substantial compliance with the life safety code requirements of the Rules for Residential or Assisted Living Facilities in Idaho. No core deficiencies were cited during the standard life safety code survey conducted on May 17, 2012.<br><br>The surveyor conducting the survey was:<br><br>Taylor Barkley<br>Health Facility Surveyor<br>Facility Fire Safety & Construction | R 000 | | |

Bureau of Facility Standards

TITLE (X6) DATE

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

IDAHO DEPARTMENT OF HEALTH & WELFARE

BUREAU OF FACILITY STANDARDS
P.O. Box 83720
Boise, ID 83720-0036
(208) 334-6626 fax: (208) 364-1888

# ASSISTED LIVING Non-Core Issues Punch List

| Facility Name | Physical Address | Phone Number |
|---|---|---|
| Almost Home | 1081 Fairwood Ct | 208-888-4791 |
| **Administrator** | **City** | **ZIP Code** |
| Dawn Hohrein | Meridian, Id | 83646 |
| **Survey Team Leader** | **Survey Type** | **Survey Date** |
| Taylor Barkley | | 5-17-12 |

## NON-CORE ISSUES

| ITEM # | RULE # 16.03.22 | DESCRIPTION | DATE RESOLVED | BFS USE |
|---|---|---|---|---|
| 1 | 750.01 | The Administrator did not have fire drill records available for review. | 6-14-12 | TB |
| 2 | 750.03 | The Administrator did not have the fuel fired heating inspection records available for review. | 6-14-12 | TB |
| 3 | 750.05 | The Administrator did not have the fire alarm inspection records available for review. | 6-14-12 | TB |
| 4 | 750.06 | The administrator did not have the sprinkler system records available for review. | 6-14-12 | TB |
| 5. | 154.01 | The Administrator did not have the Emergency Preparedness Plan available for review. | 6-14-12 | TB |
| | | | | |
| | | | | |
| | | | | |

| Response Required Date | Signature of Facility Representative | Date Signed |
|---|---|---|
| 6-17-12 | Amy Huber | 5-17-12 |