



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

September 30, 2011

Trista Wolfe, Administrator
Jefferson House
2087 South Tollgate Way
Boise, Idaho 83709

License #: RC-793

Dear Ms. Wolfe:

On September 8, 2011, a Fire Life Safety Survey was conducted at Jefferson House. 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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September 14, 2011

Trista Wolfe, Administrator
Jefferson House
2087 South Tollgate Way
Boise, Idaho 83709

Dear Ms. Wolfe:

On September 8, 2011, a Fire Life Safety Survey was conducted at Jefferson House. 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 8, 2011.

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: 13R793	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - ENTIRE BUILDING B. WING _____	(X3) DATE SURVEY COMPLETED 09/08/2011
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NAME OF PROVIDER OR SUPPLIER JEFFERSON HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 2113 WEST JEFFERSON STREET BOISE, ID 83704
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(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
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R 000	<p>Initial Comments</p> <p>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 September 8, 2011.</p> <p>The surveyor conducting the survey was:</p> <p>Taylor Barkley Health Facility Surveyor Facility Fire Safety & Construction</p>	R 000		
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Bureau of Facility Standards

TITLE

(X6) DATE

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



Facility Name Jefferson House	Physical Address 2113 W Jefferson St.	Phone Number 208-424-7822
Administrator Trista Wolfe	City Boise Id	ZIP Code 83704
Survey Team Leader Taylor Barkley	Survey Type	Survey Date 9-8-11

NON-CORE ISSUES

ITEM #	RULE #	DESCRIPTION	DATE RESOLVED	L & C USE
1	415.04	The last documented ANNUAL fire Alarm inspection WAS February 23, 2010.	3/2011	
2	415.04	The facility is not inspecting the fire alarm on a monthly basis.	9/9/11	
3	415.03	The facility is not inspecting the portable fire extinguishers on a monthly basis.	9/8/11	
4	403	The sprinkler system control valves Are not supervised.	9/9/11	
5	250.01	The light in resident room #7 is not working.	9/9/11	

Response Required Date 10-8-11	Signature of Facility Representative <i>Jennifer Goffinet</i>	Date Signed 9/8/11
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RECEIVED
SEP 19 2011

FACILITY STANDARDS