



IDAHO DEPARTMENT OF
HEALTH & WELFARE

C.L. "BUTCH" OTTER – GOVERNOR
RICHARD M. ARMSTRONG – DIRECTOR

TAMARA PRISOCK – ADMINISTRATOR
DIVISION OF LICENSING & CERTIFICATION
JAMIE SIMPSON – PROGRAM SUPERVISOR
RESIDENTIAL ASSISTED LIVING FACILITY PROGRAM
P.O. Box 83720
Boise, Idaho 83720-0009
PHONE: 208-334-6626
FAX: 208-364-1888

January 23, 2013

Christine Jeffries, Administrator
Ashley Manor Care Centers Inc. - Orchard
PO Box 1176
Meridian, ID 83642

License #: RC-646

Dear Ms. Jeffries:

On December 27, 2012, a Follow-Up/revisit survey was conducted at Ashley Manor Care Centers Inc. - Orchard. As a result of that survey, a deficient practice was found. A deficiency was cited at the following level(s):

- The non-core issue, 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 Maureen McCann, RN, Health Facility Surveyor, Residential Assisted Living Facility Program, at (208) 334-6626.

Sincerely,

Maureen McCann, RN
Team Leader
Health Facility Surveyor
Residential Assisted Living Facility Program

mmc/mmc

c: Jamie Simpson, MBA, QMRP Supervisor, Residential Assisted Living Facility Program



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December 27, 2012

Christine Jeffries, Administrator
Ashley Manor Care Centers Inc. - Orchard
PO Box 1176
Meridian, ID 83642

Dear Ms. Jeffries:

On December 27, 2012, a follow-up visit to the Complaint Investigation survey of 8/10/2012, was conducted at Ashley Manor Care Centers Inc. - Orchard. The core issue deficiencies issued as a result of the 8/10/2012, survey have been corrected.

Please bear in mind that 1 non-core issue deficiency was identified on the punch list and which was also identified as a repeat punch. As explained during the exit conference, the completed punch list form and accompanying evidence of resolution (e.g., receipts, photographs, policy updates, etc.) needs to be submitted to our office no later than January 26, 2013

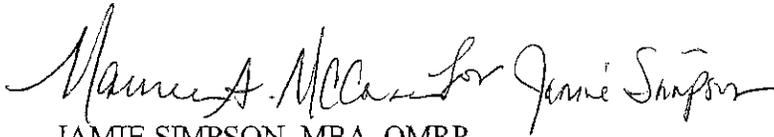
If the facility fails to submit acceptable evidence of resolution within sixty (60) days from when the facility was found out of compliance, or on a subsequent survey visit, it is determined that this deficiency still exists, the Department will have no alternative but to initiate the enforcement of civil monetary penalties, as described in IDAPA 16.03.22.910.02 and IDAPA 16.03.22.925.

Please ensure the facility is continually monitoring its compliance with state rules, as further repeat punches identified during future surveys could result in enforcement actions including:

- a. Issuance of a provisional license
- b. Limitations of admissions to the facility
- c. Hiring a consultant who submits periodic reports to the Licensing and Certification
- d. Civil monetary penalties

Our staff is available to answer questions and to assist you in identifying appropriate corrections to avoid further enforcement actions. Should you require assistance or have any questions about our visit, please contact us at (208) 334-6626. Thank you for your continued participation in the Idaho residential care assisted living facility (RALF) program.

Christine Jeffries
December 27, 2012
Page 2 of 2

A handwritten signature in cursive script that reads "Maureen A. McCann for Jamie Simpson".

JAMIE SIMPSON, MBA, QMRP
Program Supervisor
Residential Assisted Living Facility Program

mmc

c: Jean Christensen, Program Manager, Regional Medicaid Services, Region IV – DHW
