NON-CORE ISSUES

Facility	License #	Physical Address	Phone Number
Truewood by Merrill, Boise	RC-1024	2600 North Milwaukee	208-373-1234
Administrator	City	Zip Code	Survey Date
Jody Stephen	Boise	83704	02/14/2022
Survey Team Leader	Survey Type		Response Due
Burbank, Sam	Fire Life Safety and Sanitation Licensure		03/16/2022

Item #	Rule (16.03.22)	Description
1	.155.01. Relocation Agreements.	Facility relocation agreements shall be with two (2) separate locations; reviewed not less than annually: Relocation agreements are dated 2019 and with facility administrators, both at facility and the relocation location, that are no longer administrators or in the service of the facilit(ies).
2	.330.15. Fire and Life Safety Records.	Documentation missing for fire life safety inspection and not available for review at the time of survey. Examples include: Fire suppression quarterly inspections; Fuel-fired heating inspection; annual fire alarm inspection; semi-annual hood inspection and hood suppression inspection(s); UL testing for dry system pendants. Others as required.
3	.405.01. Electrical Installations and Equipment.	All exposed live connections shall be covered in electrical panels in accordance with NFPA 70 and NFPA 70A: Rear mechanical and fire alarm room main electrical disconnect panel missing an approximately six inch by 24 inch cover, exposing the live wiring for the panel.
4	.405.01.a. Electrical Installations and Equipment.	Multiple plug adapters are prohibited: Rooms 110 and 225 using 3-1 MPAs; Room 225 also had a microwave plugged into one of the two 3-1 MPAs in use.
5	.405.03. Telephone.	1) No documented inservice for staff qualifications on the risks associated with oxygen use in accordance with NFPA 99,

		Chapter 11, Section 11.5.2.1. 2) All medical gas cylinders shall be secured in accordance with NFPA 99, Chapter 11, Section 11.6.2.3: Room 107 had one (1) unsecured oxygen cylinder; room 122 had one (1) unsecured oxygen cylinder; room 219 had three (3) unsecured oxygen cylinders; Staff corridor abutting laundry room storing three liquid oxygen (LOX) cylinders (further defined) unsecured by rack, chain or cart. 3) Volumes of medical gases in excess of 300 cubic feet shall be stored in accordance with NFPA 99, Chapter 11, Section 11.6; including, but not limited to signs and construction type. Staff corridor abutting laundry had a separated room, housing three (3) LOX liberators approximately 42 liters in size, exceeding the minimum of 300 cubic feet. This space was not signed for oxygen storage.
6	.405.04. Prohibited Applications.	No documentation for annual fuel-fired heating inspection
7	.404. FIRE AND LIFE SAFETY STANDARDS FOR EXISTING BUILDINGS LICENSED FOR SEVENTEEN OR MORE RESIDENTS AND MULTI-STORY BUILDINGS.	1) No documentation on site for annual fire alarm inspection, due in January of 2022 (past due for 2022) and no documented sensitivity testing conducted in the past five years, in accordance with NFPA 72, Chapter 14. 2) No documented inspections for fire suppression system in accordance with NFPA 25, Chapter(s) 5 and 13, for the following inspections: quarterly waterflow alarm testing; dry system preaction valve full trip; No documented inspection for 2020 annual; UL testing for 15 identified dry system heads over 10 years old; heads pulled in December of 2021. 3) No documented inspections for fire suppression system and semi-annual hood cleaning for UL 300 hood system in main Kitchen, in accordance with NFPA 17A and NFPA 96. 4) FIre extinguishers shall be maintained in accordance with NFPA 10. Fire extinguishers are past due for annual inspection/maintenance (due in January 2022) and monthly inspection not documented for January of 2022. 5) Emergency preparedness training for staff shall be

		conducted in accordance with NFPA 101, Chapter 33, Section 33.7.1: No records for annual training and reviews conducted not less than bi-monthly. 6) Periodic training for residents on roles and responsibilities as outlined in the emergency plan shall be conducted in accordance with NFPA 101, Chapter 33, Section 33.7.2. No documentation for resident training. 7) No documentation for testing of Alcohol Based Hand Rub dispensers each time a refill is replaced in accordance with NFPA 101, Chapter 33 and 8, Section 33.3.4.2 and 8.7.3.3. 8) Room 248 was not equipped with a door knob or latch that would positively latch, and resist the passage of smoke. Room was also observed to be currently under construction. All doors from resident rooms entering the corridor shall close and positively latch in accordance with NFPA 101, Chapter 7. 9) Mechanical room on second floor by room 240, had open, unsealed penetration exposing the wall cavity and the lower floor. All construction for multiple-story buildings shall meet the requirements of NFPA 101, Chapter 33, Section 33.3.1.3 and Chapter 8, Section 8.2.1. Unsealed penetration of the wall cavity measured approximately 3 inches wide by 12 inches high.
8	.410. REQUIREMENTS FOR EMERGENCY ACTIONS AND FIRE DRILLS.	Emergency egress and relocation drills shall be conducted in accordance with NFPA 101, Chapter 33, Section 33.7.3.3: Emergency plan designates the point(s) of assembly as the outside parking area. Drills were not conducted for evacuation to these designated points of assembly.