NON-CORE ISSUES

Facility	License #	Physical Address	Phone Number
Gables Assisted Living and Memory Care of Caldwell	RC-1230	917 E Ustick Road	(208) 455-2324
Administrator	City	Zip Code	Survey Date
Derek Westover	Caldwell	83605	08/16/2022
Survey Team Leader	Survey Type		Response Due
Chaney, Linda	Fire Life Safety and Sanitation Licensure		09/15/2022

Item #	Rule (16.03.22)	Description
1	.155.01. Relocation Agreements.	The facility is required to review the relocation agreements annually. The last documented review/update was July 30, 2021.
2	.404. FIRE AND LIFE SAFETY STANDARDS FOR EXISTING BUILDINGS LICENSED FOR SEVENTEEN OR MORE RESIDENTS AND MULTI-STORY BUILDINGS.	The facility did not maintain compliance with the 2018 edition of NFPA 101, Life Safety Code, Chapter 33, Existing Residential Board and Care Occupancies, Large Facilities as evidenced by the following: 1.) The kitchen, laundry and Maintenance shop/storage are on the same floor as, and adjacent to, a primary means of escape. The two (2) doors from the kitchen to the dining room did not self-close and latch. The latch assembly, including the bolt and face plate had been removed. The self-closing device on the laundry room door had been removed and the door to the maintenance shop was not equipped with a self-closing device. (NFPA 101, 33.2.3.2.4) - 2.) Observation of the kitchen hood system during the facility tour revealed one of the filters had been damaged. It was bent and missing a baffle creating two (2) approximately 2-3" gaps in the filtering system, allowing grease laden vapors to pass freely into the hood.(NFPA 96, 6.2.3.4) - 3.) Observation of the spare sprinkler box at the facility riser, revealed the facility did not

		have a specialized wrench for the removal and installation of facility sprinkler pendants.(NFPA 25, 5.4.1.5.5) - 4.) Record review and observation revealed the fire extinguisher in the maintenance shop/storage and FACP room had both missed the annual inspection. The last known annual inspection on these two (2) extinguishers was May 2021.(NFPA 10, 7.3.2.1) Additionally, monthly visual inspections of all extinguishers were not completed from the date of the annual inspection, March 2022, through June 2022. When asked, the current Maintenance Director stated he had started documenting monthly inspections on the tags when he began working for the facility in July 2022.(NFPA 10, 7.2.2)
3	.405.01. Electrical Installations and Equipment.	Observation of electrical panels during the facility tour revealed the panel in the Maintenance shop and housekeeping storage area were both missing blanks, exposing the internal components of the panel.(NFPA 70, 110.12)
4	.405.01.a. Electrical Installations and Equipment.	Observation revealed the facility had an extension cord running from the desk area in the kitchen, through the open pantry door, providing power to a full-sized freezer. Extension cords are prohibited. Additionally, power cords cannot run through doorways.
5	.410. REQUIREMENTS FOR EMERGENCY ACTIONS AND FIRE DRILLS.	Emergency egress and relocation drills are required not less than six (6) times a year on a bimonthly basis, with at least two (2) of the six (6) drills at night when the residents are sleeping. The facility failed to perform drills bimonthly and did not have any documented drills at night, when the residents were sleeping. At the time of the survey, no documentation for drills performed in October, November or December of 2021 could be produced. The last known drill in 2021 was performed on September 29, 2021.