NON-CORE ISSUES

Facility	License #	Physical Address	Phone Number
Edgewood Castle Hills, LLC	RC-1210	5955 Castle Drive	208-331-1300
Administrator	City	Zip Code	Survey Date
Chuck Bosen	Boise	83703	06/15/2023
Survey Team Leader	Survey Type		Response Due
McClenathan, Teresa	Health Care Licensure and Follow-Up + complaint investigation		07/15/2023

Item #	Rule (16.03.22)	Description
1	.009.06.c. Use of Previous Criminal History and Background Check.	One of six employees, whose personnel records were reviewed and required State Police Background Checks, did not have these checks completed. The corporate administrator confirmed the State Police Background Check was not completed.
2	.215.08.d. Written Response to Complaint within Thirty Days.	The administrator did not provide a written response to complainants within 30 days. For example, the complaint log from January 2023 to May 2023 documented over ten complaints had been made to the administrator but none of the complainants received a written response. The facility administrator confirmed that written responses were not completed.
3	.215.08.g. Identify and Monitor Patterns.	The facility did not develop interventions to prevent recurrences of incidents and accidents. For example, Resident #2 had a fall on 2/3/23 and had no interventions; Resident #5 had 4 falls between 11/23/22 and 2/13/23 and the intervention was pre-filled language "focused assessment and change care plan as appropriate"; Resident #6 had five falls between 2/2/23 and 5/21/23, and had two documented interventions to elevate feet in recliner and to ask for help. The facility nurse stated the facility's policy was to implement a fall

		reduction protocol after a resident had three falls in six months.
4	.260.07. Toxic Chemicals.	Toxic chemicals were observed to be stored in unlocked areas which was accessible to cognitively impaired residents. For example: spray bottles containing toxic chemicals, including peroxide cleaning solution, were observed to be hanging on the outside of two medication carts on four different occasions from 6/13/23 to 6/15/23.
5	.310.02. Discontinued and Expired Prescriptions.	The facility did not keep a record of all non-narcotic drug disposals. The facility nurse stated they were not keeping record of the non-narcotic medications returned to pharmacy. ***Previously cited on 6/17/21***
6	.330.13. Personnel Records.	Three of seven staff members, whose personnel records were reviewed, did not have all available documentation required for each staff at the facility when requested. For example: One of five staff members, did not have evidence of a completion of medication assistance course. Two of five staff members, did not have evidence of CPR and first aid certifications. One of seven staff members, did not have 16 hour orientation training nor infection control training. Three of seven staff members had completed required background check, but did not have documentation in their personnel records. The corporate administrator stated the documentation was not in the employee files.