NON-CORE ISSUES

Facility	License #	Physical Address	Phone Number
Meadow Lake Village Retirement Resort - Owyhee Bldg	RC-1048	590 South Arbor Lane	208-888-2277
Administrator	City	Zip Code	Survey Date
Cassidy Fenton	Meridian	83642	05/10/2024
Survey Team Leader	Survey Type		Response Due
Chaney, Linda	Fire Life Safety and Sanitation Licensure		06/09/2024

Item #	Rule (16.03.22)	Description
1	.155.03. Emergency Generators.	The facility has elected to have an emergency generator on site but could not produce documentation for a monthly load test, December 2023. (NFPA, Standard 110)
2	.161. SMOKING REQUIREMENTS.	The facility did not develop and implement an adequate smoking policy which included written rules governing smoking to ensure: Smoking is prohibited in areas where combustible supplies or materials, flammable liquids, gases, or oxidizers are in use or stored. Unsupervised smoking by residents classified as not mentally or physically responsible, sedated by medication, or taking oxygen is prohibited. Designated smoking areas, if provided, are specified in policy and clearly marked.
3	.250.10.d. Heating, Ventilation, and Air-Conditioning (HVAC).	No documentation could be produced to show fire/smoke dampers had been inspected, serviced, and cleaned in the past four (4) years by a person professionally engaged in the business of servicing these devices or systems. The last known inspection was 3/14/2017.
4	.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 facility could not produce documentation for 1 of 2, semi-annual testing of the vane-type or pressure switch type waterflow alarm devices.(NFPA 25, 5.3.2.2) - 2.) The facility could not produce a 90 minute test of emergency lighting in the past 12 months.(NFPA 101, 7.9.3.1.1) - 3.) Staff training on the emergency plan shall be conducted periodically and reviewed with staff not less than bi-monthly. The facility could not produce documentation for periodic staff training or bi-monthly in-service training on their role and responsibilities as outlined in the emergency plan.(NFPA 101, 33.7.1 & 33.7.2) - 4.) The facility could only produce one of two, semi-annual ANSUL system inspections for the kitchen hood suppression system. The last known inspection was 6/29/23.(NFPA 96, 11.2.1)
5	.405.03. Telephone.	The facility could not produce documentation showing staff are trained periodically on safety guidelines, usage requirements and the risks associated with the handling and use of oxygen.(NFPA 99, 11.5.2.1)
6	.405.04. Prohibited Applications.	Fuel-fired heating devices and systems must be inspected, serviced, and cleaned at least annually by a person professionally engaged in the business of servicing these devices or systems. The facility could not produce documentation showing these systems had been inspected/serviced in the past 12 months. The last known inspection/service was on 4/28/2022.
7	.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) drills conducted at night when the residents are sleeping. Additionally, records must be maintained on file at the facility and contain a date and time of the drill, description, response of the personnel and residents, problems encountered and recommendations for improvement. The facility failed to produce drills bi-monthly. The facility produced documentation for drills on 3/29/24, 3/26/24, 3/28/24.

		4/21/23, 5/11/23, 6/30/23, 11/28/23, 12/12/23, and 12/27/23.