NON-CORE ISSUES

Facility	License #	Physical Address	Phone Number
Malad Living Center/RCF	RC-463	151 West 200 North	208-766-4724
Administrator	City	Zip Code	Survey Date
Catheryne Morales	Malad	83252	07/11/2024
Survey Team Leader	Survey Type		Response Due
Walker, Jenny	Health Care Licensure and Follow-Up + complaint investigation		08/10/2024

Item #	Rule (16.03.22)	Description
1	.009.06.c. Use of Previous Criminal History and Background Check.	One of two employees, whose files were reviewed and required an Idaho State Police background check, did not have the check completed prior to working alone with residents. The administrator stated the Idaho State Police background check result was not completed.
2	.215.01. Administrator Responsibility.	The administrator did not ensure all facility policies were developed to fulfill IDAPA 16.03.22. The facility's abuse/neglect/exploitation policy did not include how residents, staff, family, outside services and others will be educated to report abuse, neglect and exploitation, including the health care worker's duty to report; specific directions for staff, residents and visitors to immediately contact the administrator or designee in the event abuse, neglect or exploitation is witnessed or reported to them; the number to contact the local adult protection office; the phone number for law enforcement nor in the event of any emergency, 911 should be called immediately; directions for reporting in the event the administrator/designee is the alleged perpetrator; who, how, when and where the following will be documented; the initial report from the person who witnessed or was initially told about the allegation; steps taken to protect

		alleged victims and other potential victims during investigation; steps taken to investigate the allegation; interviews; the findings of the investigation including the conclusion; measures put in place and/or actions taken to prevent recurrence; any forms or systems that will be used to document the incident, allegation and investigation; identifies where all the documentation related to completed investigations will be stored; describes the steps the administrator will take to investigate the allegation, including at a minimum: Interview of the alleged victim and all potential witnesses; who will conduct the interviews and how privacy will be ensured during the interviews; identification and interview of other persons who might have knowledge of the incident or of the alleged perpetrator's previous interactions with the alleged victim and other potential victims; describes the various conclusions the administrator may reach including at a minimum, whether the alleged event occurred, and whether it constituted abuse, neglect or exploitation; for cases where the alleged perpetrator is a resident, describes specific steps to be taken to restrict access of the alleged perpetrator to alleged victim and other potential victims until the investigation is complete; for cases where the alleged perpetrator is a visitor, describes specific steps to be taken to restrict access of the alleged perpetrator to alleged victim and other potential victims until the investigation is complete; describes steps that will be taken to ensure the perpetrator has no further access to potential victims; and describes additional actions that may be taken to reduce the likelihood of future similar incidents from occurring. The facility was previously given technical assistance on 6/24/21.
3	.305.03. Change in Resident Health Status.	The facility nurse did not complete change of condition assessments. For example, Resident #1 experienced falls on 5/23/24, 6/5/24, and 6/30/24. Resident #3's blood pressure was 152/133 on 2/8/24 and was sent to the emergency room

		for an evaluation and was never assessed when they returned. Resident #3 also fell on 3/30/24, 4/3/24, and 6/7/24. Resident #1 and Resident #3 were not assessed by a facility nurse. The facility nurse stated she did not complete the change of condition assessments for these incidents.
4	.310.04.e. Psychotropic or Behavior Modifying Medication.	Six-month psychotropic medication reviews were not completed for residents who required them. For example, Resident #4 was taking risperidone, trazodone, and Vraylar for longer than six months, and there had been no psychotropic medication review completed. Resident #3 was taking escitalopram, quetiapine fumarate, and venlafaxine for longer than six months, and there had been no psychotropic medication review completed. The administrator stated they had not completed these reviews within the required timeframe.
5	.450. REQUIREMENTS FOR FOOD AND NUTRITIONAL CARE SERVICES.	The facility did not have a Certified Food Protection Manager at the time of survey. The administrator and former Certified Food Protection Manager stated the certification had expired and would be renewing it soon.