NON-CORE ISSUES

Facility	License #	Physical Address	Phone Number
Autumn Haven Assisted Living, Inc.	RC-1256	924 Christian Way	208-436-3200
Administrator	City	Zip Code	Survey Date
Angie Darrington	Rupert	83350	11/04/2024
Survey Team Leader	Survey Type		Response Due
Wilson, Jeremy	Fire Life Safety and Sanitation Licensure		12/04/2024

Item #	Rule (16.03.22)	Description
1	.330.15.a.ii. Fire and Life Safety Records.	Facility could not provide documentation of testing sensitivity of smoke detectors within the last five years.
2	.403. FIRE AND LIFE SAFETY STANDARDS FOR EXISTING BUILDINGS LICENSED FOR THREE THROUGH SIXTEEN RESIDENTS.	1. Facility failed to maintain visual inspection of fire suppression wet pressure gauges monthly in accordance with NFPA 101, Chapter 33, Section 33.2.3.5.8.2 and NFPA 25, Chapter 13, Section 13.2.7.1.1. 2. Facility failed to maintain semi-annual testing of Vane-type fire suppression systems in accordance with NFPA 25, Chapter 13, Section 13.2.6.2.2. Vane-type systems shall be tested semi-annually. 3. Facility failed to maintain components and valves of the fire suppression system in accordance with NFPA 25, Chapter 13, Section 13.2.7.2* Gauges shall be replaced every 5 years or tested every 5 years by comparison with a calibrated gauge. NFPA 25, Chapter 13, Section 13.4.2.1 Inspection. Valves shall be inspected internally every 5 years to verify that all of the valve's components operate correctly. Facility provided documentation identified the last time the gauges were calibrated/replaced, and the internal inspection of the check valves was conducted in November of 2017.

		4. Facility failed to maintain Post Indicator Valve (PIV) in accordance with NFPA 25, Chapter 13, Section 13.3.2.2* The valve inspection shall verify that the valves are in the following condition: (1) In the normal open or closed position (2) * Sealed, locked, or supervised (3) Accessible (4) Post indicator valves (PIVs) are provided with correct wrenches (5) Free from external leaks (6) Provided with applicable identification. The facilities Post Indicator Valve (PIV) viewing screen was damaged and unable to determine if the valve was in the normally open position.
3	.405.01.a. Electrical Installations and Equipment.	During facility tour it was identified in room #15 a multi-plug adapter in use, further investigation identified that an oxygen concentrator was being supplied power by this adapter. Multi-plug adapters are prohibited.
4	.405.02.a. Prohibited Applications.	During facility tour it was identified in room #12 a relocatable power tab (RPT) in use and supplying power to an oxygen concentrator. Use of a RPT to power medical devices is prohibited.