NON-CORE ISSUES

Facility	License #	Physical Address	Phone Number
Parkwood Meadows Assisted Living	RC-1323	1885 Parkwood Street	208-523-7800
Administrator	City	Zip Code	Survey Date
Caroline Young	Idaho Falls	83401	11/20/2025
Survey Team Leader	Survey Type		Response Due
Cerovski, Wendy	Health Care Licensure and Follow-Up		12/20/2025

Item #	Rule (16.03.22)	Description
1	.335.02. Standard Precautions.	On 11/19/25, during medication pass observations, a medication technician was observed administering medications to multiple residents without conducting hand hygiene between medication pass with each resident. The facility nurse stated medication technicians were expected to follow infection control standards, hand sanitizing/washing before and after dispensing medications.
2	39-3321.4. Qualifications and Requirements of Administrator.	The administrator did not immediately implement corrective action to ensure incidents and accidents did not recur. For example, Resident #2 fell thirteen times from 6/16/25 to 11/17/25, Resident #6 fell six times from 8/2/25 to 9/24/25, and Resident #7 fell six times from 7/3/25 to 11/10/25. The administrator and the facility nurse stated they did not implement new corrective actions to prevent recurrences.
3	39-3321.5. Qualifications and Requirements of Administrator.	The facility did not notify the licensing agency within one business day of a reportable incident. For example: Resident #2 fell on 6/16/25 and sustained a laceration to their head and required staples, and they also fell on 9/16/25 and 10/3/25 and was assessed by EMTs. Resident #6 fell on 8/13/25, 8/26/25 and 9/21/25 and was sent out to the hospital for

		further assessments. Resident #7 fell on 10/18/25 and was taken to the ER by family. The administrator stated they did not report the incidents to licensing and certification.