NON-CORE ISSUES

Facility	License #	Physical Address	Phone Number
Brookdale Pocatello	RC-770	1501 Baldy Avenue	208-237-6866
Administrator	City	Zip Code	Survey Date
Nichole Borden	Pocatello	83201	01/08/2026
Survey Team Leader	Survey Type		Response Due
Cerovski, Wendy	Health Care Non-Core Deficiency Follow-Up		02/07/2026

Item #	Rule (16.03.22)	Description
1	.305.03. Change in Resident Health Status.	The facility's Registered Nurse (RN) did not have an active license between 9/1/25 and the time of survey. The facility Licensed Practical Nurse (LPN) was not delegated by a licensed RN during this time period. Changes in resident health status were either completed during the unlicensed period by the RN or by a non-delegated Licensed Practical Nurse (LPN), or changes in health status were not completed when residents experienced changes in physical or mental health status. For example, Resident #10 experienced falls on 9/12/25, 10/1/25, 10/23/25, 12/1/25, 12/6/25, 12/22/25, and 12/24/25, and the facility nurse did not evaluate the resident's change of condition. Resident #1 experienced a fall on 11/23/25 and a change of condition assessment was not completed. Resident #4 had edema on 9/1/15, and was not feeling well, had runny eyes, and a cough on 11/12/25 and were assessed by the unlicensed RN. Resident #9 experienced a fall documented by hospice on 12/19/24 and did not have a change of condition documented by a facility nurse. Both the District Director of Clinical Services (DDCS) and the facility LPN confirmed changes of condition were not completed.***Previously cited on 7/24/25.***

2	.305.06.b. Self-Administered Medication.	Residents who self-administer medications were not evaluated every 90 days to ensure they were still capable to safely self-administer medications. Resident #5 and #6 both required quarterly assessments to determine the ability to self-administer medications. The quarterly self-medication assessments were completed, however, the assessment were completed by the unlicensed facility RN. The DDCS stated she was aware the RN's licensed had expired during the time frame of these assessments.***Previously Cited 7-24-25.***
3	.319. COMPREHENSIVE ASSESSMENT REQUIREMENTS.	Residents #8 and #9 had nursing pre-admission comprehensive assessments completed by the unlicensed RN. The DDCS confirmed the RN did not have an active license at the time of the assessments. ***Previously cited on 7/24/25.***
4	.330.13.d. Personnel Records.	The facility did not maintain a current copy of the facility's RN license. Per NURSYS.com nurse license verification website, the facility RN's licence expired on 8/31/25. The DDCS stated facility management became aware the previous week of the RN's expired license.
5	39-3308 Assessment (4)a Assessments	The facility did not ensure quarterly assessments were completed once every 90 days by a licensed nurse for 7 of 10 sampled residents. For example, Resident # 3 did not have a 90-day assessment completed since 2/13/25. Residents #1, #2, #4, #5, #6, and #8 had 90-day assessments completed by a unlicensed RN or a non-delegated LPN. The DDCS confirmed the facility RN's licensed had expired on 8/31/25.***Previously cited on 7/24/25.***
6	39-3308 Assessment (4)b Assessments	The facility nurse did not review and implement new orders. For example, 10 of 10 sampled residents' medications were implemented by the unlicensed RN, the non-delegated LPN, or the facility Resident Care Coordinator. The DDCS confirmed the medications were not implemented by a licensed RN or delegated LPN.***Previously cited on 7/24/25.***