NON-CORE ISSUES

Facility	License #	Physical Address	Phone Number
Pomerelle Place	RC-1302	1301 Bennett Avenue	(208) 677-8212
Administrator	City	Zip Code	Survey Date
Vanessa Anguiano	Burley	83318	03/12/2026
Survey Team Leader	Survey Type		Response Due
Cerovski, Wendy	Health Care Licensure and Follow-Up		04/11/2026

Item #	Rule (16.03.22)	Description
1	.155.01. Relocation Agreements.	The facility could not provide written/ signed agreements for transfer or relocation of residents in the event of an emergency where evacuation would be required. Each facility must have a signed written agreement developed between the facility and two (2) separate locations to which residents would be relocated in the event the building is evacuated and cannot be reoccupied. The administrator verified the facility did not have relocation agreements.
2	.310.01.g. Medication Distribution System.	The facility did not ensure all residents' as-needed (PRN) medications were available in the facility. For example, Resident #3 did not have their Banophen, hyoscyamine sulfate, and ondansetron. Resident #7 did not have their guaifenesin and Pepto-Bismol. The facility nurse confirmed the medications were not available in the facility.
3	.330. REQUIREMENTS FOR FACILITY RECORDS.	The facility did not maintain its records for a minimum of three years when the facility transitioned to a new electronic records system in October 2025. For example, the administrator and the nurse could not provide surveyors incident and accident reports prior to 10/28/25. The administrator stated they lost access to some of the previous records due to the system changes.

4	.330.04. Behavior Documentation.	Residents' care records were not maintained for each resident with all entries kept current and completed by the person providing the care. For example, six of eight sampled residents did not contain caregiver documentation. Resident #4 was ill in March 2025 and acquired pneumonia, and there was no documentation from caregivers noting this illness. Multiple staff stated they would either talk or message the nurse of any changes, and did not document them in the residents' records. The facility nurse confirmed staff would verbally alert her of residents' health issues and did not always document them in the residents' records.
5	.330.04.c.vii. Resident Care Records.	The facility nurse did not consistently document residents' changes in their physical and mental conditions nor their pre-admission assessments. For example, Resident #3 experienced lethargy, loss of appetite, and was unable to take medications on 2/13/26. Resident #4 experienced respiratory symptoms including shortness of breath and cold/flu like symptoms in March 2026 and was diagnosed with pneumonia by their provider. Resident #6 was admitted on 1/2/26 and the record did not document a pre-admission assessment. The facility nurse stated she had assessed the residents but had not documented her findings. She stated she was unaware she had to document the pre-admission assessments.