

NON-CORE ISSUES

Facility	License #	Physical Address	Phone Number
Gables of Pocatello Assisted Living	RC-1062	2805 South Grant Avenue	208-232-1091
Administrator	City	Zip Code	Survey Date
Joyce Foster	Pocatello	83204	06/05/2026
Survey Team Leader	Survey Type		Response Due
Cerovski, Wendy	Health Care Licensure and Follow-Up		07/05/2026

Item #	Rule (16.03.22)	Description
13	.410. REQUIREMENTS FOR EMERGENCY ACTIONS AND FIRE DRILLS.	The facility failed to conduct fire drills in accordance with rule. Documentation was available for 4 fire drills being conducted between 7/29/25 to 5/21/26 with only 1 drill conducted on the night shift, not meeting the requirement of at least 6 per year on a bi-monthly basis with 2 being conducted the night during normal sleeping hours. The administrator stated they need to conduct fire drills on a monthly basis to include during sleeping hours of residents.
14	.450. REQUIREMENTS FOR FOOD AND NUTRITIONAL CARE SERVICES.	The facility's Certified Food Protection Manager's certificate expired on 10/10/23. The administrator stated she was unaware it was expired.
15	.320.01. Use of NSA.	Residents' Negotiated Service Agreements (NSAs) did not clearly reflect the residents' needs nor describe the services to be provided. For example: Resident #2's NSA did not include wound care instructions for caregivers for signs or symptoms of infection or if the dressing became soiled or dislodged. Resident #2 and Resident #3's NSAs did not include instructions for the caregivers on their catheters if the catheter was leaking or no voiding or became dislodged. The administrator stated they needed to include instructions for

		the care staff to meet the needs of the residents.
16	.310.04.e. Psychotropic or Behavior Modifying Medication.	Resident #3 was taking bupropion and fluoxetine and there were psychotropic medication reviews in their record with an end date of 3/12/25. The next psychotropic medication reviews were dated 11/2/25 - 4/20/26, eight months after the prior reviews not meeting the requirement of completing a review every 6-months. Additionally, Resident #3's psychotropic medication for their fluoxetine dated 10/14/24-3/12/25 did not document behavioral updates.
17	.305.02.b. Quarterly Nursing Assessments.	The facility failed to ensure residents' medications were given as ordered. For example, Resident #2 had an order for hydrochlorothiazide to be discontinued on 5/14/26, and they have been receiving the medication daily as of 6/5/26. Resident #2 had an order for levofloxacin daily for 5 days on 5/14/26, and they only received the antibiotic 3 days. Resident #2 had an order for magic mouthwash every 6 hours scheduled and was written on the medication administration record (MAR) for May 2026 and June 2026, as needed instead of scheduled. Resident #1 had an order for miralax every other day and did not receive the medication 3 times in May 2026. The regional administrator confirmed they did not follow physician's orders.