

## NON-CORE ISSUES

Facility	License #	Physical Address	Phone Number
Edgewood Spring Creek Eagle Island, LLC	RC-1104	77 North Fisher Park Way	208-939-6499
Administrator	City	Zip Code	Survey Date
Suzanne Gerlach	Eagle	83616	01/05/2024
Survey Team Leader	Survey Type		Response Due
McClenathan, Teresa	health care licensure and follow-up		02/04/2024

Item #	Rule (16.03.22)	Description
1	.009.03.b. Availability to Work.	At the time of the survey, the facility had not yet obtained the completed criminal history background check results for three of ten staff members, and these staff members had not consistently worked in line of sight of another employee with a cleared background check. Two of the three staff members were observed working alone with residents in their rooms during survey. The administrator and business office manager stated they were not aware these employees had not worked in line-of-sight of a cleared employee.
2	.215.08.d. Written Response to Complaint within Thirty Days.	The administrator did not provide a written response to Resident #7's family member when they complained about an allegation of sexual abuse on 11/1/23, nor when Resident #6 complained about missing leftovers from their refrigerator on 10/23/23. The administrator stated she had investigated these issues and stated she was unaware a written response was to be provided to the complainants.
3	.330.09. Resident Admission and Discharge Register.	The facility did not maintain an up-to-date admission and discharge register, as the register did not accurately document who resided at the facility at the time of the survey. The administrator provided surveyors with two versions of the

		register, one a printout from the facility's electronic record system, and a separate handwritten version. Neither version captured all residents currently in living at the facility. For example, a couple who had lived at the facility for over two years were not listed on either register, nor was Resident #2 who had resided in the facility since 12/19/21.
4	.330.13. Personnel Records.	Ten of ten staff members' records reviewed did not contain all required documentation. For example, four staff members' files did not contain documentation of completed 16 hours of orientation, infection control training, and specialized training. One medication technician did not have evidence of their certification to pass medications, and one staff member, who had been employed by the facility for over three years, did not have evidence of eight hours of continuing education on an annual basis. Multiple staff members' records did not have evidence of current CPR/first aid certifications. ***Previously cited on 5/12/22 at rule 330.13.f for incomplete staff record documentation***
5	.645.02. Delegation.	The facility hired a new facility nurse in early December 2023, and at the time of the survey, she had not delegated all staff members for medication administration and other nursing tasks. The facility nurse stated she had only time to delegate the facility Licensed Practical Nurse (LPN) and one medication technician. Surveyors reviewed ten staff members' files, and none of these staff members had been delegated by the nurse, including temporary agency staff members. Several staff members interviewed stated they were unsure what to do in certain situations, such as if a resident could not verbally request as-needed medication or how often a bedbound resident should be repositioned.