



IDAHO DEPARTMENT OF
HEALTH & WELFARE

BRAD LITTLE – Governor
ALEX J. ADAMS- DIRECTOR

LAURA STUTE-- ADMINISTRATOR
DIVISION OF LICENSING & CERTIFICATION
NATE ELKINS., Chief
BUREAU OF FACILITY STANDARDS
3232 Elder Street
P.O. Box 83720
Boise, ID 83720-0009
PHONE 208-334-6626
FAX 208-364-1888

December 16, 2019

Linda Vestal, Administrator
Palouse Hills Assisted Living
1401 North Polk Street
Moscow, ID 83843

Dear Mr./Ms. Vestal

On December 3, 2019, a Fire Life Safety Survey was conducted at Palouse Hills Assisted Living. The facility was found to be providing a safe environment for its residents.

Please bear in mind that non-core issue deficiencies were identified on the punch list, a copy of which was reviewed and left with you during the exit conference, on December 3, 2019. The facility must correct non-core issue deficiencies within thirty (30) calendar days of the exit conference. Please ensure the deficiencies are corrected for all residents, staff and situations, not just those sampled during the survey, and that a plan for monitoring the situation to ensure continued compliance is implemented. The team leader will contact you in 7 to 10 days to schedule a post-survey conference. The purpose of this conference is to help you understand how compliance will be determined on the follow-up survey, so that you can make certain your corrections are adequate to avoid repeat deficiencies and maintain ongoing compliance.

Should you have any questions about our visit, please contact me at (208) 334-6626.

Sincerely,

Sam Burbank, Supervisor
Facility Fire Safety & Construction Program

SB/df



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BRAD LITTLE – Governor
DAVE JEPPESEN – Director

TAMARA PRISOCK—ADMINISTRATOR
DIVISION OF LICENSING & CERTIFICATION
TOM MOSS, LSW – PROGRAM SUPERVISOR
RESIDENTIAL ASSISTED LIVING PROGRAM
P.O. Box 83720
Boise, Idaho 83720-0009
PHONE: (208) 364-1962
E-mail: ralf@dhw.idaho.gov

February 14, 2020

Linda Vestal, Administrator
Palouse Hills Assisted Living
1401 North Polk Street
Moscow, ID 83843

License #: RC-1194

Dear Linda Vestal:

On December 03, 2019, a Fire Life Safety Survey was conducted at Palouse Hills Assisted Living. As a result of that survey, deficient practices were found. The deficiencies were cited at the following level(s):

«POCEORAcceptanceBlock»

This office is accepting your evidence of resolution

Should you have questions, please contact Sam Burbank, Health Facility Surveyor, Facility Fire Safety and Construction Program, at (208) 334-6626, option 3.

Sincerely,

A handwritten signature in blue ink that reads "Jamie Simpson". The signature is written in a cursive, flowing style.

Sam Burbank
Health Facility Surveyor
Facility Fire Safety & Construction Program

SB/lj

NON-CORE ISSUES

Facility	License #	Physical Address	Phone Number
Palouse Hills Assisted Living	RC-1194	1401 North Polk Street	208-882-3438
Administrator	City	Zip Code	Survey Date
Linda Vestal	Moscow	83843	12/03/2019
Survey Team Leader	Survey Type		Response Due
Burbank, Sam	Fire Life Safety and Sanitation Licensure		01/03/2020

Item #	Rule (16.03.22)	Description
1	.405.07. Exit Door Locks.	Northeast exit door equipped with magnetic locking arrangements and signage of releasing in 15 seconds, but does not release until 30 seconds. Door locking arrangements shall be in accordance with NFPA 101, chapter 7, section 7.2.1.6.1
2	.415.04. Fire Alarm Smoke Detection System Service and Testing.	No record of sensitivity testing completed after new installation of addressable fire alarm system. Addressable systems are permitted to have sensitivity testing documentation printed at the panel.
3	.415.05. Automatic Fire Extinguishing System Service and Testing.	1) Painted head at the main Kitchen. Heads that are obstructed with paint, corrosion or mis-aligned shall be replaced in accordance with NFPA 25, section 2-2.1.1 2) No record of last ten-year testing or replacement on dry barrel pendants in accordance with 2-3.1.1 and TIA 98-1 3) No record of five-year obstruction investigation as noted on sprinkler report. Obstruction inspections shall be completed in accordance with NFPA 25, section 2-2.4.2 5) No record of three of four quarterly waterflow alarm inspections. Waterflow alarm shall be tested in accordance with NFPA 25, section 2-3.3 6) No record of monthly control valve inspections in accordance with NFPA 25, 9-3.3.1

4	.415.05. Automatic Fire Extinguishing System Service and Testing.	Semi-annual hood suppression system: Only one of two completed in the past six months Semi-annual hood inspection and cleaning: Only one of two completed in the past six months.
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