

## NON-CORE ISSUES

| Facility                         | License #                           | Physical Address   | Phone Number |
|----------------------------------|-------------------------------------|--------------------|--------------|
| Lodge at Bristol Heights #1, The | RC-1259                             | 2220 E Prairie Ave | 208 457 3403 |
| Administrator                    | City                                | Zip Code           | Survey Date  |
| Danielle Giovanelli              | Coeur d'Alene                       | 83815              | 03/24/2026   |
| Survey Team Leader               | Survey Type                         |                    | Response Due |
| Lu, Melvin                       | Health Care Complaint Investigation |                    | 04/23/2026   |

| Item # | Rule (16.03.22)                           | Description                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
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| 22     | .305.02.b. Quarterly Nursing Assessments. | The facility did not ensure residents received medications and treatments as ordered by their provider. Multiple residents and staff stated medications were not consistently given. Three of three sampled residents' Medication Assistance Records (MARs) reviewed for January and February 2026 contained many blank entries that did not have corresponding paper documentation to indicate whether or not the medications were given. For example, Resident #2's March 2026 MAR documented 19 blank entries out of 69 opportunities for their risperidone and 13 blank entries out of 23 opportunities for their cholestyramine. The residential care coordinator, a facility nurse, and the administrator each confirmed the blank entries on the residents' MARs left it ambiguous whether the medications were given.***Previously cited on 9/12/25.*** |
| 23     | .625.03.k. Content for Training.          | The facility did not ensure infection control training was completed for three of eight employees, whose personnel files were reviewed. For example, one of the staff members who did not receive the training was observed to not clean an unidentified resident's abdomen prior to injecting insulin. A facility nurse stated staff would be retrained for proper                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |

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|    |                                                                                                                                                                   | infection control procedures. The administrator stated the three staff in question were hired prior to her start and the infection control training was not completed.                                                                                                                                                                                                                                                               |
| 24 | .625.01. Number of Hours of Training.                                                                                                                             | Five of eight staff, whose records were reviewed, did not have 16 hours of orientation training. Multiple staff stated they received less than 16 hours of training prior working alone, and a few staff stated the entirety of their orientation consisted of shadowing only one 8-hour shift. The facility administrator stated the staff in question were hired prior to her employment and did not receive orientation training. |
| 25 | .630. TRAINING REQUIREMENTS FOR FACILITIES ADMITTING RESIDENTS WITH A DIAGNOSIS OF DEMENTIA, MENTAL ILLNESS, DEVELOPMENTAL DISABILITY, OR TRAUMATIC BRAIN INJURY. | Five of eight staff, whose records were reviewed, did not have specialized training for residents with developmental disability, mental illness, traumatic brain injury, or dementia. The facility administrator stated the staff in question were hired prior to her employment and did not receive specialized training.                                                                                                           |