



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

March 17, 2020

Jon Potter, Administrator
Fairwinds - Sandcreek
999 3rd Avenue, Suite 4550
Seattle, WA 98104

Dear Mr./Ms. Potter

On March 4, 2020, a Fire Life Safety Survey was conducted at Fairwinds - Sandcreek. 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 March 4, 2020. 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



IDAHO DEPARTMENT OF
HEALTH & WELFARE

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

August 11, 2020

Jon Potter, Administrator
Fairwinds - Sandcreek
999 3rd Avenue, Suite 4550
Seattle, WA 98104

License #: RC-661

Dear Jon Potter:

On March 4, 2020, a Fire Life Safety Survey was conducted at Fairwinds - Sandcreek. 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 fluid and cursive, with the first name "Jamie" and last name "Simpson" clearly legible.

Sam Burbank
Health Facility Surveyor
Facility Fire Safety & Construction Program

SB/lj

NON-CORE ISSUES

Facility	License #	Physical Address	Phone Number
Fairwinds - Sandcreek	RC-661	3310 Valencia Drive	208-542-6200
Administrator	City	Zip Code	Survey Date
Debbie Henscheid	Idaho Falls	83404	03/04/2020
Survey Team Leader	Survey Type		Response Due
Burbank, Sam	Fire Life Safety and Sanitation Licensure		04/04/2020

Item #	Rule (16.03.22)	Description
1	.405.01. Medical Gases.	Electrical installations shall be in accordance with NFPA 70 and approved, listed assemblies, such as UL 1363 XYBS: Marketing office using an outlet/junction box to supply power to a relocatable power tap, with exposed wiring leaving from the conduit into the box.
2	.405.01.b. Electrical Installations and Equipment.	Multiple plug adapters and extension cords are prohibited: Marketing office using a RPT plugged into a multiple plug adapter.
3	.405.05. Structure, Maintenance, Equipment to Assure Safety.	1) Emergency light testing shall be conducted for 30 seconds monthly and 90 minutes annually: No record of emergency light testing conducted for month of June, no record for annual emergency light testing. 2) Fire Dampers shall be tested every four years: No record for four-year testing on installed fire dampers. 3) Missing/damaged ceiling tiles shall be replaced/repared: Kitchen suspended ceiling tiles cooler/freezer, eight feet by six inches open to interstitial space above, allowing smoke and fire to pass into and bypass protections in place (fire alarm/sprinklers); Two foot by one foot above ice cream sink, diagonal ceiling tile missing; Two (2) two-foot by one foot sections of missing ceiling tile(s) above water softener in

		breakroom. 4) Doors to protected enclosures such as vertical shafts and stairwells shall be protected by self-closing doors and are required to latch in accordance with NFPA 101, Chapter 7: Fire door to second floor entry to the elevator would not close and latch; Door to stairwell outside room N230 would not close and latch.
4	.405.05.f. Structure, Maintenance, Equipment to Assure Safety.	Portable heaters are prohibited: Room N128 and Room N203 both using portable heater plugged into relocatable power tap.
5	.410.02. Fire Drills.	Fire drills are required one per shift per quarter: No fire drills documented for fourth quarter of 2019, all shifts; No Evening or noc shift for third quarter of 2019; No day shift for second quarter of 2019.
6	.415.05. Automatic Fire Extinguishing System Service and Testing.	1) Only 1 of 2 semi-annual hood cleaning/inspections completed within the past 12 months; only 1 of 2 semi-annual hood suppression/inspections completed. 2) No record of 10-year dry system inspection completed: UL Testing or replacement of dry system pendants.