



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

April 4, 2019

Joy Cook, Administrator  
Serenity Place Residential Care  
1917 17th Avenue  
Lewiston, ID 83501

Dear Mr./Ms. Cook

On March 28, 2019, a Fire Life Safety Survey was conducted at Serenity Place Residential Care. 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 28, 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  
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Boise, Idaho 83720-0009  
PHONE: (208) 364-1962  
E-mail: [ralf@dhw.idaho.gov](mailto:ralf@dhw.idaho.gov)

April 30, 2019

Joy Cook, Administrator  
Serenity Place Residential Care  
1917 17th Avenue  
Lewiston, ID 83501

License #: RC-969

Dear Joy Cook:

On March 28, 2019, a Fire Life Safety Survey was conducted at Serenity Place Residential Care. 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 |
|---------------------------------|-------------------------------------------|------------------|--------------|
| Serenity Place Residential Care | RC-969                                    | 1917 17th Avenue | 208-743-5322 |
| Administrator                   | City                                      | Zip Code         | Survey Date  |
| Joy Cook                        | Lewiston                                  | 83501            | 03/28/2019   |
| Survey Team Leader              | Survey Type                               |                  | Response Due |
| Burbank, Sam                    | Fire Life Safety and Sanitation Licensure |                  | 04/28/2019   |

| Item # | Rule (16.03.22)                                                   | Description                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|--------|-------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1      | .405.05. Structure, Maintenance, Equipment to Assure Safety.      | Stair doors separating two levels shall self-close and shall only be held open by a means interconnected to the fire alarm in accordance with NFPA 101, Chpt. 7, Section 7.2.1.8.2: Door at the top of the stairs separating the office level to the main facility was blocked open by a bag and would not fully self-close when released from the magnetic hold-open.                                                                                                                                                                                                                                                                                                                                                                                              |
| 2      | .415.05. Automatic Fire Extinguishing System Service and Testing. | <p>1) Dry gauges shall be inspected weekly in accordance with NFPA 25, 2-2.4.2: No records for weekly dry system gauge inspections.</p> <p>2) System is a modified 13R with a six inch main and 3" line feed. No records for quarterly waterflow alarm testing. Waterflow alarms shall be tested quarterly in accordance with NFPA 25, 2-3.3.</p> <p>3) No records for weekly or monthly control valve inspections. Control valves shall be inspected not less than monthly (secured) in accordance with NFPA 25, 9-3.3.1.</p> <p>4) Sprinkler report dated 7/27/2018 does not have any indicating marks by vendor that indicates status of inspection, i.e. "Yes", "No", or "N/A". All boxes were left blank. Report shall indicate status of inspected items.</p> |