

**Iowa Department of Inspections and Appeals
Health Facilities Division
Adult Services Civil Penalty Citation**

Date: 3/22/19
Program Name: Elmwood PE, LLC
Address: 190 15 th Street Onawa, IA 57040
Type of Action: Complaint Revisit 77752-I, 77845-C, 78314-I
Date(s) of Action: 1/28/19 – 2/18/19

State Rule #	State Rule	Amount of Civil Penalty
67.13(4)	<p>481-67.13(17A,231C,85GA,SF394) Exit interview, final report, plan of correction.</p> <p>67.13(4) Monitoring revisit. The department may conduct a monitoring revisit to ensure that the plan of correction has been implemented and the regulatory insufficiency has been corrected. The department may issue a regulatory insufficiency for failure to implement the plan of correction. A monitoring revisit by the department shall review the program prospectively from the date of the plan of correction to determine compliance.</p> <p>Based on interview and record review the Program failed to implement the plan of correction dated 12/3/18. Finding follows:</p> <p>Record review revealed the plan of correction submitted by the program for a complaint visit, completed 10/3/18. The plan of correction indicated regulatory insufficiencies would be corrected by 12/3/18, including a regulatory insufficiency cited at Iowa Administrative Code (IAC) chapter 67.5(6).</p> <p>During the revisit a regulatory insufficiency was cited at IAC 67.5(6), for a tenant not receiving pain medication as order by the physician.</p>	\$3000.00
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67.5(6)d	<p>481-67.5(231B,231C,231D) Medications. Each program shall follow its own written medication policy, which shall include the following:</p> <p>67.5(6) When medications are administered traditionally by the program:</p> <p style="padding-left: 40px;">d. Medications shall be administered as prescribed by the tenant's physician, advanced registered nurse practitioner or physician assistant.</p> <p>Based on interview and record review the Program failed to consistently administer medications as prescribed. This affected 1 of 4 tenants reviewed (Tenant #4). Finding follows:</p> <p>Record review on 2/18/19 revealed Tenant #4's Medication Administration Record (MAR) for January 2019. A notation by staff</p>	

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	<p>on 1/1/19 and 1/2/19 documented staff did not administer Hydrocodone and noted there were no pills available at the Program. The actual notation read "none in the lockbox."</p> <p>Further review revealed Tenant #4's Controlled Medication Utilization Record. The following entries were made on the record 1/1/19 7:00 p.m. and 1/2/19 7:00 a.m. "No Hydro to give."</p> <p>Record review revealed Tenant #4's History and Physical dated 7/26/18 which included the order for hydrocodone four times a day for chronic back pain. Tenant #4's functional/health evaluation and service plan dated 9/25/18 confirmed the Tenant required medication management assistance from the Program.</p> <p>During an interview with the Director at 2:05 p.m. on 2/18/19 the Director stated the Program completed a medication error report. She provided the document which noted Tenant #4's hydrocodone 10/325 mg had been ordered from the pharmacy on 12/29/18, but not delivered in time so Tenant #4's 7:00 p.m. dose on 1/1/19 and 7:00 a.m. dose on 1/2/19 had not been administered as ordered.</p> <p>During the exit on 2/18/19 at 5:15 p.m. the Director, Administrator and delegating nurse acknowledged the Program failed to administer medications as ordered by the physician because the medications were not available.</p>	
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