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6/14/19

PRINTED: 06/06/2019
FORM APPROVED

DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: S0209	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/22/2019
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NAME OF PROVIDER OR SUPPLIER ROSE OF AMES	STREET ADDRESS, CITY, STATE, ZIP CODE 1315 COCONINO DRIVE AMES, IA 50014
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments Assisted Living Programs are defined by the type of population served. The census numbers were provided by the Program at the time of the on-site. Number of tenants without cognitive disorder: 55 Number of tenants with cognitive disorder: 0 Total population of Program at time of on-site: 55 The following regulatory insufficiencies were cited during the recertification visit conducted to determine compliance with certification for an Assisted Living Program.	A 000		
A 013	481-67.3(2) Tenant Rights 481-67.3 Tenant rights. All tenants have the following rights: 67.3(2) To receive care, treatment and services which are adequate and appropriate. This REQUIREMENT is not met as evidenced by: Based on interview the Program failed to provide adequate treatment and services that potentially affected all 55 tenants. Findings follow: During a tenant meeting on 5-21-19 at 3:00 p.m. several tenants expressed concerns regarding the quality of food served. The tenants stated they were served liver that was green and tasted odd and refused to eat it.	A 013	See attached response and plan of correction.	

DIVISION OF HEALTH FACILITIES - STATE OF IOWA

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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A 013	<p>Continued From page 1</p> <p>On 5-22-19 at 11:20 a.m. the Kitchen Manager confirmed the liver turned green during the cooking process and was unsure why this happened. She stated she was unsure if it should be served but proceeded to serve it to the tenants. She she did not taste it before serving and would not have wanted to eat it herself. She stated many of the tenants complained about the meat and refused to eat it.</p>	A 013		
A 125	<p>481-67.19(5) Record Checks</p> <p>481-67.19(135C,231B,231C,231D) Criminal, dependent adult abuse, and child abuse record checks.</p> <p>67.19(5) Employment prohibition. A person who has committed a crime or has a record of founded child or dependent adult abuse shall not be employed in a program unless an evaluation has been performed by the department of human services.</p> <p>This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program failed to ensure approval was received from the Department of Human Services (DHS) prior to hire for 2 of 2 staff reviewed with a criminal history (Staff A and Staff B). Findings follow:</p> <p>Review of Staff A's file indicated a hire date of 12-31-18. Continued review revealed the Single Contact License and Background Check completed 12-28-18 indicated further research for a possible criminal record was required. The</p>	A 125	<p><i>See attached response and plan of correction.</i></p>	

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A 125	Continued From page 2 criminal history documentation was sent to the Program on 12-31-18. A Record Check Evaluation form was sent to the Department of Human Services (DHS) on 1-17-19. The approval to work letter from DHS was dated 1-17-19. A review of timecards revealed Staff A's first date of paid wages was 1-7-19. Review of Staff B's file indicated a hire date of 11-30-18. Continued review revealed the Single Contact License and Background Check completed 1-14-19 indicated further research for a possible criminal record was required. The criminal history documentation was sent to the Program on 1-16-19. A Record Check Evaluation form was sent to DHS on 1-17-19. The approval to work letter from DHS was dated 1-17-19. A review of timecards revealed Staff B's first date of paid wages was 12-23-18. During an interview on 5-21-19 at 4:17 p.m. the Registered Nurse Administrator confirmed these finding.	A 125		

The Rose of Ames, L.P.
 By: *EverGreen Real Estate Development Corp., Gen. P+R.*
 By: *[Signature] A [Signature], President*
Gregory A. McClenahan
 6-10-2019

✓ 6/14/19

Response to Statement of Deficiencies - Plan of Correction

Recertification Visit – 5-21 & 5-22, 2019

Statement of Deficiencies – 6-6-19

Plan of Correction – 6-10-19

481-67.3(2) Tenant Rights – All tenants shall have the following rights: (2) To receive care, treatment and services which are adequate and appropriate.

Plan of Correction: We understand that the green discoloration of the cooked liver occurred due to an oxidation process. While apparently not harmful, the green liver should not have been served. The cook should have consulted with her supervising Culinary Director for guidance. The cook will be counseled by the Culinary Director regarding the need to communicate in such situations. Date of compliance is June 14, 2019. To avoid recurrence, the importance of communication and consultation in similar situations will be emphasized upon each visit to the Ames kitchen by the Culinary Direction for a period of two months.

481-67.19(5) Record Checks – Criminal, dependent adult abuse, and child abuse record checks. (5) Employment prohibition. A person who has committed a crime ... shall not be employed in a program unless an evaluation has been performed by the department of human services.

Plan of Correction: Administration and staff have been re-oriented as to the requirement for DHS clearance before hiring an applicant whose SING report evidences a crime. The supervisor/clinical manager who was responsible for hiring and permitting the two employees to work prior to DHS clearance is no longer an employee and the hiring infraction was limited to that former employee's circumstances at the time. This incident has been presented to the current three clinical managers as an emphasis to the importance of complying with this hiring practice. Date of compliance is June 14, 2019. To avoid recurrence, the new hire background process for all new Open Arms or Rose employees will be audited by the Open Arms - Ames clinical manager or the Rose of Ames Administrator for each new Open Arms or Rose employee for the next two months to assure compliance.

✓  6/12/19