

**Iowa Department of Inspections and Appeals  
Health Facilities Division  
Citation**

Citation Number: <b>7085</b>		Date: January 7, 2020		
Facility Name: Crestview Acres		Survey Dates: December 16-24, 2019		
Facility Address/City/State/Zip:  1485 Grand Marion, IA 52302		MW, TAG		
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date

<b>56.6(1)</b>	<p><b>481—56.6(135C) Treble and double fines.</b>  <b>56.6(1) Treble fines for repeated violations.</b> The director of the department of inspections and appeals shall treble the penalties specified in rule 481—56.3(135C) for any second or subsequent class I or class II violation occurring within any 12-month period, if a citation was issued for the same class I or class II violation occurring within that period and a penalty was assessed therefor.</p>	<b>I</b>	<b>\$13,500 (Treble) (Held in Suspension)</b>	<b>UPON RECEIPT</b>
<b>58.19(2)j</b>	<p><b>481—58.19(135C) Required nursing services for residents.</b> The resident shall receive and the facility shall provide, as appropriate, the following required nursing services under the 24-hour direction of qualified nurses with ancillary coverage as set forth in these rules:  <b>58.19(2) Medication and treatment.</b>  <i>j.</i> Provision of accurate assessment and timely intervention for all residents who have an onset of adverse symptoms which represent a change in mental, emotional, or physical condition. (I, II, III)</p> <p><b>DESCRIPTION:</b>  Based on observations, interviews, and record review the facility failed to identify a significant weight loss for 1 out of 1 residents reviewed (Resident # 66). The facility reported a census of 74 resident.</p>			

\_\_\_\_\_  
Facility Administrator

\_\_\_\_\_  
Date

**If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty-five percent (35%) pursuant to Iowa Code section 135C.43A (2013).**

**Iowa Department of Inspections and Appeals  
Health Facilities Division  
Citation**

<b>Citation Number:</b> 7085					<b>Date:</b> January 7, 2020
<b>Facility Name:</b> Crestview Acres		<b>Survey Dates:</b> December 16-24, 2019			
<b>Facility Address/City/State/Zip:</b>  1485 Grand Marion, IA 52302		<b>MW, TAG</b>			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

	<p>Findings included:</p> <p>The Minimum Data Set (MDS) assessment for Resident #66 dated 11/15/19 identified a diagnosis of Non-Alzheimer's Dementia. The Brief Interview of Mental Status (BIMS) reflected a score of 00 indicating severe cognitive impairment. The MDS identified the resident requiring extensive assist of one staff for eating, personal hygiene and extensive assist of two staff for transfers.</p> <p>The Care Plan dated 3/5/16, directed staff to monitor weight per facility protocol, Physician's orders or as indicated. Notify family/Physician of significant weight changes in a timely manner and the Registered Dietitian (RD) will assess as indicated/ordered.</p> <p>Review of the Quality Assurance Weekly Weight Loss Meeting list provided indicated Resident #66 with a significant weight loss on 10% over 180 days.</p> <p>The Physician's Progress Note dated 6/2/19 listed the resident weight as 143.5 pounds.</p> <p>Review of the Medication Administration Record (MAR) and Treatment Administration Record (TAR) dated 11/2019 and 12/2019, lacked direction for staff to administer the resident a Health Nutrition shake or a high calorie supplement.</p> <p>Review of the Weights and Vitals Summary for Resident #66 on 5/1/2019, listed weight of 142.8 lbs.</p>			
--	--	--	--	--

\_\_\_\_\_  
Facility Administrator

\_\_\_\_\_  
Date

**If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty-five percent (35%) pursuant to Iowa Code section 135C.43A (2013).**

**Iowa Department of Inspections and Appeals  
Health Facilities Division  
Citation**

<b>Citation Number:</b> 7085					<b>Date:</b> January 7, 2020
<b>Facility Name:</b> Crestview Acres		<b>Survey Dates:</b> December 16-24, 2019			
<b>Facility Address/City/State/Zip:</b>  1485 Grand Marion, IA 52302		<b>MW, TAG</b>			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

	<p>The weight listed for Resident #66 on 11/4/2019, is 127.2 pounds, which is a -10.92 % loss in 6 months.</p> <p>Review of the Dietitian's Recommendation sheets dated for September 2019, October 2019, November 2019 and December 2019 lacked identification of the significant weight loss for Resident #66.</p> <p>During an interview on 12/19/19 at 11:43 a.m., Staff QQ, Dietary Staff reported working at the facility for 2 years. Staff QQ continued to report Resident #66 always sat at an assisted table, is dependent on staff to eat, and the resident leans more at the table and is sleepy.</p> <p>During an interview on 12/19/19 at 11:34 a.m., Staff J, Licensed Practical Nurse (LPN) reported the resident is not receiving any supplement for weight loss.</p> <p>During an interview on 12/19/19 at 12:01 p.m., the Director of Nursing (DON) pulled up the Weights and Vitals Summary report for Resident #66. The DON confirmed the resident had a significant weight loss in 180 days for December, November, October, September, and August. The DON acknowledged the weight report the Dietitian provided about the resident lacked documentation in regards to the significant weight loss.</p> <p>The DON reported unaware of Resident #66's significant weight loss.</p>				
--	---	--	--	--	--

\_\_\_\_\_  
Facility Administrator

\_\_\_\_\_  
Date

**If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty-five percent (35%) pursuant to Iowa Code section 135C.43A (2013).**

**Iowa Department of Inspections and Appeals  
Health Facilities Division  
Citation**

<b>Citation Number:</b> 7085					<b>Date:</b> January 7, 2020
<b>Facility Name:</b> Crestview Acres		<b>Survey Dates:</b> December 16-24, 2019			
<b>Facility Address/City/State/Zip:</b>  1485 Grand Marion, IA 52302		<b>MW, TAG</b>			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

	<p>The facility provided an undated policy titled Procedure - Weight Meeting that directed the following:</p> <ul style="list-style-type: none"> <li>a. A monthly weight with noted significant changes (gains, losses and new admission) will be due to the Team each Monday as collected by the Dietary Manager.</li> <li>b. The Team (Director of Nursing, Nurse Manager, Dietitian, Dietary Director and Administrator) will review the weights at the weekly Skin Meeting every Tuesday at 11:00 a.m.</li> <li>c. The Dietitian will make recommendations based on the losses and gains.</li> </ul> <p><b>FACILITY RESPONSE:</b></p>			
--	---	--	--	--

\_\_\_\_\_  
Facility Administrator

\_\_\_\_\_  
Date

**If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty-five percent (35%) pursuant to Iowa Code section 135C.43A (2013).**