Citation Numb 7093	er:				Date: Janu	ary 21, 2020	
Facility Name: Kahl Home For	r The Aged & Infirmed			Survey Dates: January 6-7, 2020			
Facility Address/City/State/Zip: 6701 Jersey Ridge Road				January	January 6-7, 2020		
Davenport, IA		MW, TAG					
Rule or Code Section	Natur	re of Violation Clas			Fine Amoun	Correction date	

58.19.(2)a	<ul> <li>481—58.19(135C) Required nursing services for residents. 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:</li> <li>58.19(2) Medication and treatment.</li> <li>a. Administration of all medications as ordered by the physician including oral, instillations, topical, injectable (to be injected by a registered nurse or licensed practical nurse only); (I, II)</li> </ul>	1	\$6,250 (Held In Suspension)	UPON RECEIPT
	Based on observation, record review, staff, resident and family member interviews, the facility failed to prevent a significant medication error that required transfer to the hospital Emergency Room (ER) for treatment and hospitalization for Resident #1. The facility reported a census of 107 residents. Findings include:			
	The 12/31/19 Minimum Data Set (MDS) Assessment tool revealed Resident #1 admitted to the facility on 12/30/19 with diagnoses that included non-Alzheimer's dementia, acute appendicitis, asthma, dependence on supplemental oxygen and restless leg syndrome (RLS). Noted cognitive assessment not completed, and required assistance of 1 staff to reposition in bed, transfer to and from bed and chair, ambulation,			

Page 1 of 8

Facility Administrator

Citation Number 7093	er:			Date: Januar	y 21, 2020	
Facility Name: Kahl Home For	The Aged & Infirmed			anuary 6-7, 2020		
Facility Address/City/State/Zip: 6701 Jersey Ridge Road			Cundu	anuary 0-7, 2020		
Davenport, IA 52807		MW, TAG				
Rule or Code Section	Natur	e of Violation	Class	Fine Amount	Correction date	
			Ш			

toileting and personal hygiene. Physician orders dated	
12/30/19 directed admission to the facility post	
appendectomy, the resident allergic to Gabapentin	
(anti-seizure medication also used for treatment of	
neuropathy pain and RLS), Requip (a dopamine	
agonist to treat RLS), Xanax (anti-anxiety medication)	
and Latex, and staff to administer medications that	
included:	
1. Albuterol Sulfate (a bronchodilator) 2.5 milligrams	
(mg) in 3 milliliter (ml) solution via nebulizer inhalation	
every 4 hours as needed.	
2. Aricept (a cholinesterase inhibitor used for	
Alzheimer's disease treatment) 5 mg oral daily.	
3. Aspirin 81 mg tablet oral daily.	
4. Symbicort (corticosteroid used for asthma) 2 puffs	
inhaled orally twice daily.	
5. Benadryl (antihistamine) 50 mg administered oral	
daily at bedtime for insomnia.	
6. Singulair (anti-inflammatory medication for asthma	
treatment) 10 mg administered oral daily.	
7. Prednisone (steroid) 10 mg administered oral daily	
as needed for asthma.	
8. Spiriva (anticholinergic medication for asthma) 2	
puffs inhaled oral daily.	
9. Hydrocodone-acetaminophen 5-325 mg (Vicodin, a	
strong narcotic analgesic) 1 tablet administered oral	
every 4 hours as needed.	
Vital signs recorded at 9:20 p.m. upon the resident's	
12/30/19 admission were blood pressure 135/75	
millimeters mercury (mmHg), pulse 88 and respirations	
18 per minute, oxygen saturation of 94 percent with	
	Page <b>2</b> of

Facility Administrator

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).

Citation Numb 7093	per:				Date: January	y 21, 2020
Facility Name: Kahl Home For The Aged & Infirmed Facility Address/City/State/Zip:			Survey I January		20	
6701 Jersey R Davenport, IA	-	MW, TAG				
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date
	<ul> <li>cannula.</li> <li>A Medication Error Rep Resident #1 received m intended for another resincluded blood pressure identified as an allergy.</li> <li>The nurse, Staff A, Lice administered the following the following tablet.</li> <li>Isosorbide Mononitra medication that prevent</li> <li>Magnesium Oxide (m tablet.</li> <li>Coumadin (blood thir 5. Metroprolol (beta-blo pressure) 50 mg tablet.</li> <li>Sotalol (beta-blocker 40 mg tablet.</li> <li>Sotalol (beta-blocker 40 mg tablet.</li> <li>Gabapentin 100 mg t</li> <li>A Nurse's Note transcrift revealed blood pressure practitioner notified and</li> </ul>	sident (Resident #2), that e medications and Gabapentin, ansed Practical Nurse (LPN), ing medications in error: tion that decreases cholesterol) te ER (extended release s angina) 60 mg tablet. hagnesium supplement) 400 hner) 3 mg tablet. cker that reduces blood g (stool softener) 1 tablet. that reduces blood pressure)				

Page 3 of 8

Facility Administrator

n						
Citation Numb 7093	er:				Date:	y 21, 2020
7093					bandary	<i>y</i> 21, 2020
Facility Name:			Survey	Dates:		
Kahl Home Fo	r The Aged & Infirmed		January	6-7.20	20	
Facility Addres	ss/City/State/Zip:		• • • • • • • • •	• • • , =•		
6701 Jersey R	idge Road					
Davenport, IA		MW, TAG				
Rule or	1			Eino /	Amount	Correction
Code	Natur	e of Violation	Class		Amount	date
Section						
	A bospital ER Progress	Note dated 12/31/19 revealed				
		hypotension that resulted from				
		e nursing home, intravenous				
	fluids with continuous monitoring and hospitalization required.					
	required.					
		Administration Policy, dated				
	as last reviewed 10/25/ 1. The individual admin	istering medications must verify				
		efore giving the resident his/her				
	medication.	a the resident included				
	2. Methods of identifying checking the photograp	h attached to the medication				
		ent by name, and utilizing other				
	staff to assist in the ider	ntification of the resident.				
	Staff interviews reveale	d:				
	1/6/20 at 2:31 p.m., Sta	ff A, LPN, stated she worked				
		to 2:00 p.m.) on 12/31/19, and				
	a chaotic day. There were several new residents, the 2 Certified Nursing Assistants (CNA's) assigned to the					
	unit new and unfamiliar with resident routines and she					
	had multiple interruptions when she administered					
		the residents assigned to her #1 and Resident #2 admitted				
		neither had a photo on their				
	Medication Administrati	on Record (MAR), one way				
		hey had the right resident I medication. Between 8:00				
		sident #1 seated in a wheel				

Page 4 of 8

Facility Administrator

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).

chair in her room, the resident's name observed on the nameplate in the hall by her door. Staff A prepared

Citation Numb 7093	er:				Date: Janua	ry 21, 2020	
Facility Name: Kahl Home For The Aged & Infirmed				Survey Dates: January 6-7, 2020			
Facility Address/City/State/Zip: 6701 Jersey Ridge Road				oandary	iual y 0-7, 2020		
Davenport, IA 52807		MW, TAG					
Rule or Code Section	Nature of Violation			Class	Fine Amount	Correction date	

Resident #2's medications, walked into Resident #1's room, called the resident by Resident #2's name,	
Resident #1 said "yes", she administered the	
medications to the resident who did not say anything	
else, and she documented Resident #2's medications	
were administered on the MAR. Staff A stated	
between 9:00 a.m. and 9:15 a.m., as she prepared	
Resident #1's medications, she realized she had made	
the mistake, contacted the Nurse Practitioner and the	
Director of Nursing (DON) right away, assessed the	
resident's blood pressure noting to be low and	
completed the actions required to transfer the resident	
to the hospital. Staff A reported being a nurse 18	
years and never made a medication error until this.	
1/6/20 at 4:38 p.m., Staff B, LPN, stated she worked	
on an as needed basis. When she administered	
medications, she asked the resident's name, she has	
asked other staff on duty to help her identify residents,	
looked for residents in their room and if in doubt would	
call the Nursing Supervisor.	
1/7/20 at 7:40 a.m., Staff C, Certified Medication Aide	
(CMA), stated if there was a new resident she would	
identify them by the photo, ask the resident their name	
if able to say it, and ask other staff to identify the	
resident.	
1/7/20 at 8:06 a.m., Staff D, LPN, stated if a new	
resident he would check their photo, although	
sometimes there was not one, would ask the resident	
their name if able to say it. Also, ask other staff if they	
could identify the resident and look for the resident in	
	Page <b>5</b> of <b>8</b>

Facility Administrator

Date

Citation Num 7093	ber:			Date: Januar	y 21, 2020
Facility Name: Kahl Home For The Aged & Infirmed Facility Address/City/State/Zip: 6701 Jersey Ridge Road			Survey I January	Dates: 6-7, 2020	
Davenport, IA		MW, TAG			
Rule or Code Nature Section		re of Violation	Class	Fine Amount	Correction date
	their room when he cor	npleted medication			

	administration for new residents.		
	1/7/20 at 8:36 a.m., Staff E, Registered Nurse (RN), stated if administering medications to a new resident she would ask the resident their name, check the photo although sometimes there was not a photo if the resident admitted the day before. Also, ask other staff if they knew the resident, check for the resident in their room, and knows the other residents well enough that she would recognize a new face. Staff E reported could also ask the Unit Manager for assistance to identify a resident.		
	1/6/20 at 9:55 a.m., the Director of Nursing (DON), stated when staff administered medications, she expected them to look at the resident's photo on the MAR, check the name on the resident's door, and ask other staff to assist to identify the correct resident. All nursing staff educated after the error occurred.		
	1/7/20 at 11:10 a.m., the DON and Administrator stated in the future if multiple admissions on the same day, they would not put them in neighboring rooms. They recognized that on the day the error occurred, the Unit Manager was off, the two CNA's were not familiar with the residents or the routine on that unit and they would have approached Staff A with all questions and caused frequent interruptions. They also reported going to educate staff not to interrupt the nurse when at the medication cart or in process of medication administration.		
1		1	

Page 6 of 8

Facility Administrator

Citation Numb 7093	er:				Date: Januar	y 21, 2020
Facility Name: Kahl Home Fo	r The Aged & Infirmed	•		Survey Dates: January 6-7, 2020		
Facility Address/City/State/Zip: 6701 Jersey Ridge Road				January 0-7, 2020		
Davenport, IA 52807		MW, TAG				
Rule or Code Section	Nature of Violation			Class	Fine Amount	Correction date

On 1/6/20, the resident's family member and responsible party stated the facility notified them of the medication error, the ER had to contact a poison control center in order to treat one of the medications that the resident received in error, and the hospital transferred the resident to another facility on 1/3/20.		
FACILITY RESPONSE:		

Page **7** of **8** 

Facility Administrator

Date

Citation Number: 7093				Date: Januar	y 21, 2020	
Facility Name: Kahl Home For The Aged & Infirmed				Survey Dates: January 6-7, 2020		
Facility Address/City/State/Zip: 6701 Jersey Ridge Road Davenport, IA 52807			January	January 0-7, 2020		
		MW, TAG				
Rule or Code Section	Nature of Violation		Class	Fine Amount	Correction date	

Page 8 of 8

Facility Administrator