Citation Numb	er:			Dat Jul	re: y 19, 2019
Facility Name: Cedar Falls Health Center			Survey D		
Facility Address/City/State/Zip			Julie 24-	21, 2013	
1728 W 8 <sup>th</sup> Street Cedar Falls, Iowa 50613		MW			
Rule or Code Section	Natur	e of Violation	Class	Fine Amou	Int Correction date
58.28(3)e	others, or elements in DESCRIPTION:  Based on observation policy and staff intervent ensure that each resist supervision to prevent residents (Resident # at increased risk for efacility unsupervised, immediate jeopardy to safety. The facility represidents.  1. Resident #48 had a	shall receive adequate at against hazards from self, a the environment. (I, II, III)  a, record review, facility iews the facility failed to dent receives adequate t elopement for 1 of 13 48), identified by the facility elopement, who exited the which resulted in an oresidents health and		\$4500 (Held in suspension	UPON RECEIPT
	diagnosis of anxiety of Schizoaffective disord of 4 of 15 on a BIMS status) test which indi cognition. The MDS of	lisorder, Schizophrenia and der, bipolar type and a score (brief interview for mental icated severely impaired locumented no wandering ambulation in room and			
					Page <b>1</b> of 8
Facilit	y Administrator	Date	e		

Citation Numb	er:			9, 2019	
Facility Name: Cedar Falls He			Survey D	ates:	
	ss/City/State/Zip		June 24-2		
1728 W 8 <sup>th</sup> Str					
Cedar Falls, Io		MW			
Rule or Code Section	Natur	e of Violation	Class	Fine Amount	Correction date
	focus area titled resid risk/wanderer as evid place, impaired safety wanders aimlessly wire attempt to distract frougheasant diversions, so conversation, television prefers. A revision da goal that the resident unattended through the include that included to leave facility due to assist with calling famassure safety and not attempting to remove Invite to scheduled act staff or responsible particular in the Elopement Risk form is placed in the Elope station. Repeat Wander guard applied function every shift.  A Progress note date	enced by disoriented to a wareness, resident th interventions that included m wandering by offering structured activities food, on, book of which resident te of 6/4/19 established a will not leave facility he review date. Interventions if resident expresses desire of missing friends/family, hily/friends. Intervene to tify nurse if notice resident is Wander Guard device. Extivities. Resident my have earty to go outside. See the property dressed for inclement the sists on going outside. The analysis and at Risk for each nurses dering and at Risk for each routinely and with condition. Wander Alert-It, check placement and			Page <b>2</b> of
Facilit	y Administrator		 е	<del></del>	

Citation Number: 7013				Date: July 1	9, 2019
Facility Name:			Survey I	Dates:	
Cedar Falls He			June 24	-27, 2019	
Facility Addre	ss/City/State/Zip				
1728 W 8 <sup>th</sup> Str		MW			
Cedar Falls, Id	owa 50613				
Rule or Code Section	Natur	e of Violation	Class	Fine Amount	Correction date
		ing on the couch in the aff A (certified nursing			
	assistant) was in room A1 doing a 1-1 with a resident, Staff A asked if someone would sit with				
	ice. Staff B sat in room	iff A went to the kitchen for mean A1 for less than 5			
		B and Staff A switched back			
was OK, and where t		the window that resident and Staff B asked if resident			
		ney were going. Resident			
		h me". Staff A and Staff B ". Staff A using a calming			
		on to convince resident to			
		e. Resident reassured by			
		talk to the social worker on home. I want to go to my			
		. I don't want to be trapped			
		th and redirection to get			
		k in with Staff B and Staff A. e and functioning. Head to			
		olete. No abnormal findings.			
	An incident summary	with no date, documented			
		ween 3:45 p.m., and 3:50			
		served in the front facility The resident had a BIMS			
		ndicated severely impaired			
	for decision making a	bilities. Staff A saw the			
		dow of room A1 and upon			
	arriving outside to rec	lirect the resident with Staff			Page <b>3</b> of
					i age <b>y</b> oi
Facilit	ty Administrator	Dat	e		

Citation Number: 7013					Date: July 19,	2019
Facility Name: Cedar Falls Health Center			Survey I		<u> </u>	
Facility Addre	ss/City/State/Zip		Julie 24	-21, 2013	,	
1728 W 8 <sup>th</sup> Street Cedar Falls, Iowa 50613		MW				
Rule or Code Section	Natur	e of Violation	Class	Fine A	mount	Correction date
	in the parking lot belofamily member. Resident and a light weight lon shoes on. Resident he well. The outside tem resident was noted to Fahrenheit. No rain of Staff A and Staff B imaccompany the resident was noted to resist retuning to the assessment of resident wander guard system for proper functioning provided on elopemer A Wandering and at Find the dated 6/2/19, identified for wandering.  A Wandering and at Find the dated 4/11/19, identified the da	pened a door to a van sitting onging to another resident dent was dressed in pants g sleeved shirt with tennis ad 4 wheeled walker with as perature at the time the be outside was 75 degrees r inclement weather noted. In the back into the facility. To be a bit upset but did not building. Head to toe ent completed by Staff B, with oper placement and function pard verified at this time. In and door alarms checked as well. Staff re-education and policy and procedures.  Risk for Elopement form and the resident with a score and resident with a score and resident is at moderate.				

Page 4 of 8

Facility Administrator

Date

Citation Numb	er:				Date: July 19,	2019
Facility Name: Cedar Falls Health Center			Survey I	Dates: -27, 2019	)	
Facility Addres	ss/City/State/Zip					
1728 W 8 <sup>th</sup> Stre Cedar Falls, lo		MW				
Rule or Code Section	Natur	e of Violation	Class	Fine A	mount	Correction date
	of 6/25/19, had a pury safety by responding assessing the reason include:  *Staff are expected alarms at All times.  *The following steps alarm sounds.  1. The alarm panel widentify which door is 2. Staff will respond to the cause of the sound visual assessment of 3. If the cause of the sidentified, staff will co count and document daily census sheet.  4. The Missing Reside implemented by staff is observed outside the resident count is inact.  During an interview of A (certified nursing as doing a 1-1 on a resident count is stated glass of ice so she as as a server or safe as a safe as a server or s	for the alarm. Guidelines to respond to ALL door will be taken when a door ill be checked by staff to sounding. In the door alarm, to assess using alarm, including a the area outside of the door, sounding alarm is not induct a visualized resident the resident count using the ent Protocol will be in the event that a resident in the event that a resident in the secured doors or if the curate.  In 6/24/19 at 3:42 p.m., Staff is is that in room A1, for which is bouth hallway, facing the did that the resident wanted a				Page <b>5</b> of

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 lowa Code section 135C.43A (2013).

Date

Facility Administrator

Citation Number: 7013				Date: July 19	, 2019
Facility Name:		•	Survey D	Pates:	
Cedar Falls He			June 24-	27, 2019	
Facility Addre	ss/City/State/Zip				
1728 W 8 <sup>th</sup> Str		MW			
Cedar Falls, Id	owa 50613				
Rule or Code Section	Natur	e of Violation	Class	Correction date	
	she was going by the on the center hallway she didn't think anyth sounding and proceed station (on the east side passed right by the wastation) and walked in Staff A looked out the lot and saw a resident van. Staff A ran out of Staff B that a resident outside. Staff A and Staff A and soutside and persuade facility. Staff A admitted the wanderguard position the A-B nurse the door that the smooth at the smooth at the smooth at the resident in room A staff A asked if she was the resident in room A room with in 1-2 minuted of the room, got to the	ded to go by the A-B nurses ide of the facility) and ander guard door alarm wall of the A-B nurses nto the resident room when with which with wall of the A-B nurses nto the resident room when window facing the parking that attempting to get into a find the room and yelled at the was in the parking lot staff B went and pushed the right side of the front exitularms and proceeded to go the resident back into the ed that she had failed to look anel on the north wall station and just felt it was			Page & of
					Page <b>6</b> of
Facili	ty Administrator		 e		

Citation Number: 7013					Date: July 19	, 2019
Facility Name Cedar Falls H			Survey I		9	
Facility Address/City/State/Zip				21, 201		
1728 W 8 <sup>th</sup> Street Cedar Falls, Iowa 50613		MW				
Rule or Code Section	Natur	e of Violation				Correction date
	lot attempting to get in went out the front door codes to silence the a assist the resident bath During an environment p.m., the Administrate the staff and resident resident took on 6/2/1 and assisted to meast described below:  The distance from which care to the parked varies as 1/2 inch cemmore surveyor steps. Road) for which care traveling by at 35 miles.	ntal tour on 6/24/19 at 4:00 or demonstrated the actions had taken and the route the 19 after exiting the facility ure the distances as  where the resident was last an in the parking lot was 73 the parked van, stepping tent parking curb was 36 to a 4 lane highway (Hudson and delivery trucks were as per hour.  Service Forecast Office for the temperature at 77				Page 7 of
						Page <b>7</b> of
Facili	ty Administrator	Dat	 :e			

Citation Numb	er:			Date: July 19	, 2019	
Facility Name:			Survey I	Survey Dates:		
Cedar Falls Health Center			June 24-27, 2019			
Facility Address/City/State/Zip			odiio 17 11, 1010			
1728 W 8 <sup>th</sup> Street						
Cedar Falls, Iowa 50613		MW				
Rule or				Fine Amount	Correction	
Code	Natur	e of Violation	Class		date	
Section						

		Page <b>8</b> of <b>8</b>
Facility Administrator	Date	