Iowa Department of Inspections, Appeals, and Licensing
Health & Safety Division
Adult Services Civil Penalty Citation

Date: September 28, 2026
Program Name: StoryPoint Riverwoods
Address: 2210 East Park Avenue Des Moines, Iowa 50320
Type of Action: Recertification Visit & Investigations #131754-C, #132504-C, #132562-C
Date(s) of Action: 7/20/26 - 7/23/26
Citation #11257

State Rule #		Amount of Civil Penalty
Iowa Administrative Code 481 Chapter 69.27(2)	**481—69.27(231C) Nurse review.** **69.27(2) If a tenant receives personal or health-related care, the program shall provide for a registered nurse or a licensed practical nurse via nurse delegation:** **c. To assess and document the health status of each tenant, to make recommendations and referrals as appropriate, and to monitor progress relating to previous recommendations at least every 90 days and whenever there are changes in the tenant's health status;** Based on interview and record review, the program failed to complete nurse reviews at least every 90 days for 2 of 4 tenants reviewed (Tenant #1 and Tenant #3). Findings follow: 1. Record review on 7/20/26 revealed Tenant #1 admitted to the program on 7/31/25. The program last completed a comprehensive 30-day evaluation on 8/30/25 and Tenant #1 should have been due for a 90-day quarterly reviews on or around the date of 11/30/25, but the nurse review could not be located. Record review further revealed no quarterly nurse reviews were on file from November 2025, February 2026, or May 2026 or with any possible change of condition since the 30-day evaluation on 8/30/25. Record review on 7/20/26 revealed Tenant #1 had been evaluated by an outside provider on 5/11/26 for her bilateral lower extremities, noted dry skin with discoloration and instructed program staff to clean with VASHE wash every day, cover with xeroform gauze, and wrap with compression every day. An encounter note from the outside provider dated 5/14/26 noted Tenant #1 was evaluated for acute follow-up for bilateral lower	**$2500.00**

	extremities (BLLE) edema and wounds. The encounter notes revealed Tenant #1 had "4+ edema" and "wounds to both lower legs with appearance of fungal versus maceration and hyperkeratotic". The Skin Inspection area of the encounter note revealed Tenant #1 was noted to have "BLLE Hyperkeratotic macerated wounds entire calves of both legs - lipodermatosclerosis serous drainage - large amount" and noted wound care should continue. An encounter note dated 5/28/26 noted Tenant #1 was evaluated for acute follow-up for BLLE edema and wounds. The encounter notes revealed Tenant #1 continued "with weeping of wounds, but improved. Edema is improved but continues at 3+. Wounds to both lower legs had been macerated appearance with atypical fungal. Improved." The Skin Inspection area of the encounter note revealed Tenant #1 was noted to have "BLLE Hyperkeratotic macerated wounds entire calves of both legs - lipodermatosclerosis serous drainage - large amount" and noted wound care should continue. During a staff interview on 7/21/26 at 10:45am with Staff A, Staff A recalled Tenant #1 had been admitted to the program with wounds on both of her legs. When questioned on Tenant #1's current wounds and wound care needs, Staff A confirmed staff were required to clean and wrap the wounds. Staff A stated Tenant #1 had wounds on both legs and Tenant #1's legs had a smell to them and would sometimes be "watery", but were not open wounds. During a staff interview on 7/21/26 at 10:58am with Staff B, Staff B recalled Tenant #1 had been admitted to the program with wounds on her legs. When questioned on Tenant #1's current wounds and wound care needs, Staff B confirmed staff provided wound care to Tenant #1 and stated Tenant #1's legs looked big and bruised, were sometimes red in color but then sometimes were not, but did not recall Tenant #1's legs/wounds having an odor. Staff B stated she didn't feel Tenant #1's weren't any better or worse since admission, but were "in the middle." During a staff interview on 7/21/26 at 11:14am with Staff C, Staff C recalled Tenant #1 had been admitted to the program with leg wounds and recalled staff had been told Tenant #1 had just gotten out of the hospital after "a bug or something had laid eggs" in the wounds and Tenant #1 was at the program as staff "needed to help her take care of it and heal." When questioned on Tenant #1's current wounds and wound care needs, Staff C stated Tenant #1's leg wounds were "open and oozing" and they were "somewhat white, bright red" and "stunk so bad" and were "sometimes oozing	

	clear and sometimes yellow". Staff C stated program staff were required to wrap the legs every three days. Staff C stated she felt Tenant #1's wounds got worse since residing at the program, and "it didn't help that she stopped taking her meds and showers" and "it also didn't help that she washed her clothes and wraps in mouthwash." Record review on 7/22/26 revealed Tenant #1 had been evaluated by an outside provider on 6/25/26 for her bilateral lower extremities, noted Tenant #1 "does continue with significant Lymphedema/peripheral edema. Present of hyperkeratotic tissue" and "today much improved without further candidiasis. No open wounds present" and "discussed wounds and wound care is resolving and only require for dressing change 3x/week as needed." Record review on 7/23/26 revealed an additional encounter visit note dated 6/4/26 provided by Tenant #1's outside provider for wounds noted Tenant #1 had been seen for an acute visit for follow-up BLLE edema and wounds and noted Tenant #1 "has been with weeping wounds, continues to improve. Edema is stable" and noted weekly follow-up. The Skin Inspection section of the encounter visit note revealed Tenant #1 had "BLLE Hyperkeratotic macerated wounds - improving entire calves of of both legs - lipodermatosclerosis serous drainage minimal." Record review on 7/22/26 of hospital records revealed Tenant #1 admitted to the hospital from the hospital emergency department and was noted to be incontinent of urine with skin break down noted, and had arrived without oxygen with oxygen saturation at 78%. The hospital notes indicated the Registered Nurse took Tenant #1's dressings off the bilateral legs, the xeroform had been covered with gauze and the xeroform was dry and stuck to Tenant #1's legs. The note further indicated when hospital staff uncovered Tenant #1's left leg, a quarter-sized ulcer was identified and noted to have multiple maggots come out of the wound. The note further identified Tenant #1's bottom was also very red with some open areas. When interviewed on 7/23/26 by phone at 2:35pm, the Wellness Director (WD) acknowledged she had entered a note 7/16/26 which indicated Tenant #1 had been sent out to the hospital, but acknowledged she had not entered any additional progress notes for Tenant #1 within the last three months. The WD believed that staff had reported that Tenant #1's legs were getting more swollen. She stated she had last gone down to assess Tenant #1's legs and	

	believed this was on or around the date of 5/11/26 according to wound care supplies being ordered, but acknowledged she hadn't documented when she had completed the assessment or noted what she had observed in regards to Tenant #1's legs/wounds, and stated she should have documented it, but she gets busy with being responsible for two buildings and sometimes forgets. The WD stated she relied on encounter notes from Tenant #1's outside provider for updates regarding the status of Tenant #1's legs/wounds. The WD acknowledged the wound care visits from Tenant #1's outside provider were occurring about every other week, but not recall if any visits had occurred after the last visit on 6/25/26. When interviewed on 7/21/26 the Executive Director (ED) acknowledged via email response at 8:04pm no quarterly reviews appeared to have been completed for Tenant #1. 2. Tenant #3 admitted to the program on 4/16/26 and resided in the memory care unit. The program last completed a comprehensive admission evaluation on 4/16/26 and Tenant #3 should have been due for a 90-day quarterly review by 7/16/26, but the nurse review could not be located. During an interview on 7/23/26 at 12:45pm the Executive Director acknowledged a quarterly nurse review had not yet been completed for Tenant #3.	