

INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

DEAN A. LERNER, DIRECTOR

PATTY JUDGE
LT. GOVERNOR

February 8, 2010

Incident # 26595-I
Complaint # 25297-C

Niki Gillies, Director
Bickford Cottage
4040 E 55th St
Davenport, IA 52807-2905

**RE: Final Incident, Complaint Investigation and Recertification Monitoring Evaluation
Report, Bickford Cottage, Davenport, IA**

Dear Ms. Gillies:

Enclosed is the **Incident, Complaint Investigation and Recertification Monitoring Evaluation Report** completed by the Department of Inspections and Appeals (DIA) in accordance with Iowa Code section 231C.7 (2009) and Iowa Administrative Code, chapters 481—67 & 69, pertaining to monitoring, civil penalties and complaints regarding assisted living programs. **No Regulatory Insufficiencies were identified.**

The review of the recertification documents you submitted have been completed and are accepted. In addition, the State Fire Marshal's (SFM) inspection report has been received as well as the Facility Engineer's approval of the Evacuation Plans for your program.

Enclosed you will find the Assisted Living Program Certificate **#S0054** with effective dates of **October 23, 2009** through **October 22, 2011**. This certificate must be posted in the building for public viewing.

If you have questions, please contact me at 515-281-4116.

Sincerely,


Chris Nothhaft
Certification Coordinator – Eastern Iowa
Adult Services Bureau

Enclosure

LUCAS STATE OFFICE BUILDING, 321 EAST 12TH STREET, DES MOINES, IOWA 50319-0083

ADMINISTRATION
(515) 281-5457
FAX: (515) 242-6863

ADMINISTRATIVE HEARINGS
(515) 281-4843
FAX: (515) 281-4477
Telephone Number for the Hearing Impaired: (515) 242-6515

HEALTH FACILITIES
(515) 281-4115
FAX: (515) 242-5022

INVESTIGATIONS
(515) 281-5714
FAX: (515) 242-6507

Iowa Department of Inspections and Appeals
Assisted Living Program
Final Incident Investigation & Complaint Investigation & Recertification
Monitoring Evaluation Report

Assisted Living Program:

Niki Gillies, Director
Bickford Cottage
4040 E 55th St
Davenport, IA 52807-2905

Incident Intake #: 26595-I
Complaint Intake#: 25297-C

Date of Incident/Complaint Investigation/Monitoring Visit:

January 19, 2010

Monitor(s):

Stephanie Cummins, MA

Definitions:

The following definitions are relevant:

Regulatory Insufficiency - A violation of a statutory or rule provision within the Iowa Code or Iowa Administrative Code (IAC) governing assisted living programs. A regulatory insufficiency requires a plan of correction to be presented to, and approved by, the Department of Inspections and Appeals (DIA).

Plan of Correction - A written response to one or more regulatory insufficiencies that are rule violations. IAC r. 481-67.10(5). The plan should identify how, and by a specific date, an insufficiency will be corrected. The plan is due to DIA within ten (10) working days of the program's receipt of an Incident Investigation Report. Depending on the circumstances, DIA may revisit the assisted living program to confirm progress in fulfilling a plan's corrective measures.

Dementia-specific assisted living program - An assisted living program certified under 481 IAC - chapter 69 that: serves fewer than fifty-five (55) tenants and has five (5) or more tenants who have dementia between Stages 4 and 7 on the Global Deterioration Scale or serves 55 or more tenants and 10 percent or more of the tenants have dementia between Stages 4 and 7 on the Global Deterioration Scale or holds itself out as providing specialized care for persons with dementia, such as Alzheimer's disease, in a dedicated setting.

Overview:

An on-site visit was conducted at Bickford Cottage on January 19, 2010. In preparing this report, the following information was considered:

Current Program Census:

General Population Program (GPP)* – A program that is not a Dementia Specific program, but may have tenants with cognitive disorder.

Current number of tenants without cognitive disorder: 25

Current number of tenants with cognitive disorder: 3

Total Population of GPP: 28

Dementia Specific Program (DSP)* – A program that is dementia specific and provides specialized care in a dedicated setting.

Total Population of DSP: 6

Total Census of ALP: 34

***These are the census numbers represented by the program to be applicable at the time of the on-site.**

Tenant/Family Satisfaction Results – A community meeting with four tenants, one tenant interview and one family interview was held. Tenants stated their apartments were cleaned routinely, there were no odors in the hallways and they did not have any issues with housekeeping or maintenance. Tenants described staff as top notch and good and stated there were enough staff to meet their needs. They stated staff answer their requests for assistance quickly and did things before the tenants had to ask. They indicated the nurse was available when needed. Tenants described the food as good, stated substitutions were available and that the variety, temperature and quantity of food was appropriate. Tenants also indicated the program accommodated special diets. One tenant requested more shrimp be served and stated the food was tough. Tenants received a schedule of activities and stated there were sufficient activities offered. Staff also remind tenants of activities and tenants choose if they participate. Tenants felt safe and stated the program was security for families and tenants. They felt like they were getting what they signed up for at admission and made their own decisions. Tenants were satisfied with the program and would recommend it to others. One tenant stated the program was well managed and another tenant stated it was like home.

Program History – There have been no substantiated Regulatory Insufficiencies this certification period.

On-Site Monitoring Evaluation – The monitor(s) made the observations detailed in the following areas. **There were no regulatory insufficiencies found during this recertification monitoring evaluation.**

A. Staffing

Incident Allegation #26595-I: It was reported by the program that a tenant was in the courtyard with his/her pet and was found on the sidewalk. It was reported the cause of the fall was unknown. The nurse responded and found the tenant on the sidewalk alert and oriented and reporting pain to the right leg. It was reported the nurse observed a slight rotation in the right leg and called 911 for ambulance transport. It was reported the tenant had a broken hip and had surgery.

Monitoring Observation: Four tenant files were reviewed. Tenant #1, 87 years old was admitted on 11-3-07 and diagnoses include: Alzheimer's Dementia, Hypertension (HTN), Benign Prostate Hypertrophy (BHP), Hypercholesterolemia and Osteoporosis.

According to an Incident Report dated 12-4-09, the registered nurse (RN) found Tenant #1 lying on his/her back on the sidewalk in the courtyard. The tenant stated his/her right leg hurt on the outside above the knee and the tenant was resting with the right knee bent and right foot on the ground. The tenant's dog was still on the leash and was up by the tenant's right shoulder. There was no rain, snow or ice on the ground. The tenant was wearing a knee length winter coat and a hat with flaps but no gloves. The report indicated the temperature was approximately 25 degrees. The RN observed the tenant's right leg showed slight external rotation and she called 911 for ambulance transport. Staff brought blankets to cover the tenant and provide a cushion for his/her head until the ambulance arrived. Tenant #1 was taken to the hospital emergency room (ER) for evaluation and the tenant's physician and family were notified. According to a Fall Investigation form, the tenant was walking his/her dog at the time of the incident and in addition to the hip injury, had a slightly red area on the left ear that was being treated. The tenant had one other Incident Report in the past six months dated 9-5-09. This report noted the tenant tripped over another tenant's walker while chasing his/her dog. The tenant did not sustain any injuries with this incident.

The RN was interviewed and stated that at 5:00 p.m. another tenant informed her that a tenant was lying on the sidewalk in the courtyard. The RN responded and found the tenant on the sidewalk with his/her right leg up. The tenant was wearing shoes, a winter coat and hat with flaps but no gloves. The tenant reported he/she had fallen and had pain in the right leg above the knee. The tenant straightened his/her legs and the RN noticed rotation. She had staff bring blankets and she called 911. The RN stayed with the tenant until the Fire Department and Medics arrived. The tenant denied hitting his/her head and only had pain in lower part of thigh. The tenant was alert and talking and staff wrapped blankets around the tenant and got his/her head off of the sidewalk. The tenant did not have any elopements and ambulated independently without a walker. The RN stated the tenant's gait was steady. The temperature at the time of the incident was approximately 24-25 degrees and there was no snow or ice on the ground or sidewalks. The tenant sustained a hip fracture, had surgery and was at facility for rehabilitation at the time of the on-site. The RN stated this was the first fall the tenant had since she started.

The tenant's service plan indicated the tenant ambulated independently and his/her gait was slightly unsteady when he/she was walking the dog due to the dog pulling on the leash. The service plan indicated the tenant liked to walk the dog and staff were to

remind him to walk slowly when he/she was walking the dog. The service plan indicated to encourage the tenant to ask for help if the dog seemed rambunctious or excited and to sit, not stand, while the dog runs in the courtyard. The tenant felt very strongly about caring for the dog. The service plan stated the tenant and family handle all the dogs needs.

- Regulatory Insufficiency: None noted.

B. Structural requirements

Complaint Allegation #25297-C: It was alleged a tenant had a pet that urinated and defecated in the apartment and the carpet and the apartment had a urine and ammonia odor. It was alleged several staff refused to spend any length of time in the apartment due to the odor, that the odor was noticeable outside the apartment, that the odor was toxic and that it may not be a safe environment for the tenant. It was alleged the pet was energetic and the tenant had skin tears from the pet. It was alleged administrative and corporate staff were aware of the situation and nothing was done.

Monitoring Observation: According to Progress Notes dated 7-2-09, the Director spoke with the enacted legal representative for Tenant #1 about odor issues from the tenant's apartment. Carpet cleaning, deodorizing and repairs were scheduled for 7-8-09 and if those interventions did not solve the odor issue it was determined that the carpet would be replaced and ultimately if the issue was not resolved it could potentially result in a 30 day notice of discharge.

According to progress notes dated 8-18-09, the odor issues with the tenant's carpet were re-visited with the legal representative and the legal representative was informed that earlier carpet cleaning did not solve the odor issue and the carpet would need to be changed.

According to a statement from the Director dated 8-28-09, the Director spoke with the tenant's family on the phone regarding the odor coming from the tenant's apartment. It was a concern because it was emanating out into the hallway and the RN explained it was a potential hazard to the tenant's health. The statement indicated it could not be determined if the tenant's dog was urinating in the apartment or if the tenant was missing the toilet when urinating, stepping in the urine and then tracking it around the apartment. The Director suggested replacing the carpet and offered to put the cost on the monthly bill or prorate the amount. The Director explained that if possible interventions of replacing the carpet, linoleum in the bathroom or placing rugs around the toilet were not effective the program would look at giving a 30 day notice of discharge. The Director reviewed the Pet Policy with the tenant's legal representative.

The Director provided a statement dated 9-8-09, indicating she followed up with the tenant's legal representative. The tenant's family decided they wanted to have the opportunity to professionally clean the tenant's carpet and put his/her apartment on a regularly scheduled cleaning/maintenance plan to see if it helped before replacing the carpet. The proposal was accepted by the Director and if it did not work another solution would be needed. The Director also rented an industrial air purifier from a local business to eliminate odors. This machine was used for eight hours in the tenant's apartment.

The Director provided a written statement on 10-1-09 indicating she spoke with the tenant's legal representative regarding the odor in the tenant's apartment. The tenant's family agreed to replace the linoleum which occurred on 10-9-09. A 30 day notice of discharge was not issued due to the family working toward a solution to eliminate the odor issue.

According to Progress Notes dated 10-19-09, the tenant had increased issues with incontinence, the tendency to rinse and re-use incontinence products and trouble urinating into the toilet while standing. Rugs were placed around the toilet to catch urine and will be washed regularly. Evaluations were updated and the tenant's service plan was updated as needed.

According to the Director, the tenant's family had the tenant's carpet professionally deodorized and cleaned on 7-8-09 and 10-13-09.

According to an invoice the tenant had two air deodorizers in his/her apartment that were serviced every two weeks.

According to an invoice, the tenant's linoleum was replaced on 10-9-09.

According to an invoice, the program rented an industrial strength air purifier on 9-8-09.

Staff #1, #2, #3, the RN and the Director indicated none of the staff refused to provide cares for the tenant. Staff #1, #2, #3 and the RN and the Director indicated the tenant did not complain about the odor.

The RN stated the tenant did not have any health issues related to odor and none of the other tenants had any health issues related to the odor. The RN stated the tenant had skin tears in the past and none while she was there.

The Director stated the tenant had skin tears a couple of times and did not have any infections related to the skin tears.

According to an Incident report dated 5-22-09, the tenant was outside in the courtyard and cut his/her hand. The tenant was taken to a clinic and returned with steri strips and staff were to monitor the wound for signs and symptoms of infection. Progress notes dated 8-15-09, indicated the tenant had a skin tear from playing with the dog. Notes indicated the wound was healed on 8-28-09 with no signs or symptoms of infection.

A community meeting with four tenants, one tenant interview and one family interview were held. The tenants stated their apartments were cleaned routinely and they did not have any issues with housekeeping or maintenance. Tenants stated there were no issues with odors in the hallways. According to an interview with a tenant and a family member, there were no issues with odors or housekeeping in the building.

The monitor took a tour of the building and did not notice any pet or urine odors in the building. The monitor observed the tenant's apartment. There were areas on the floor that appeared to be stained/worn; however, the monitor was not able to determine if they were pet stains or high traffic areas resulting in wear to the carpet. The apartment had a

rug that covered an area of the carpet that was torn up. The monitor observed rugs on the bathroom floor around the toilet.

The tenant's service plan indicated the tenant received weekly housekeeping services and staff checked the tenant's bathroom on a daily basis for soiled rugs or floor. Staff were to remove any soiled rugs and wash the rugs and floor immediately. The service plan indicated the tenant and his/her family were responsible for all the dog's needs and they had the carpet cleaned on a regular basis. The service plan indicated to check the tenant's apartment for soiled incontinence products and to remove them by approaching the tenant in a calm respectful manner and to remind him/her to change the incontinence product or clothes if they noticed a urine odor.

On 12-4-09 the tenant fell in the courtyard, sustained a hip fracture, had surgery and went to a facility for rehabilitation. The tenant was at that facility at the time of the on-site. The tenant's dog was adopted by a staff at the program.

- Regulatory Insufficiency: None noted.

Dated this 8th day of February, 2010.