

IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

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Complaint/Incident Intake #: 44795-C

August 16, 2013

Ms. Jean Parrish, Director
Prime Living Apartments
725 Pearl Street
Sioux City, IA 51101

**RE: Final Complaint/Incident Investigation Report – Prime Living Apartments,
Sioux City, IA**

Dear Ms. Parrish:

Enclosed is the **Final Complaint/Incident Investigation Report** from the on-site monitoring visit of August 13, 2013, completed by the Department of Inspections and Appeals (“DIA”) in accordance with Iowa Code chapter 231C and Iowa Administrative Code (“IAC”) chapters 481—67 and 481—69. **No Regulatory Insufficiencies were identified.**

If you have any questions regarding the enclosed Report, please contact me at 515/281-4116 or **James.Berkley@dia.iowa.gov**

Sincerely,

Jim Berkley

Jim Berkley
Program Coordinator
Adult Services Bureau

Enclosure

IOWA DEPARTMENT OF INSPECTIONS AND APPEALS
Assisted Living Program
Final Complaint/Incident Investigation Report

Assisted Living Program:

Jean Parrish, Director
Prime Living Apartments
725 Pearl Street
Sioux City, IA 51101

Complaint/Incident Intake #: 44795-C

Date of Complaint/Incident Investigation:

August 13, 2013

Monitor(s):

Lori Miner, RN BSN

Definitions: *The following definitions are relevant:*

Assisted Living Program – A program certified under 481 IAC 69 that provides housing with contracted services to three or more tenants in a physical structure that provides a homelike environment. Services may include but are not limited to health-related care, personal care, and assistance with instrumental activities of daily living. A General Population Program is an Assisted Living Program that is not dementia-specific but may have tenants with cognitive disorder.

Dementia-Specific Assisted Living Program - An assisted living program certified under 481 IAC 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 (GDS), or serves 55 or more tenants and 10 percent or more of the tenants have dementia between Stages 4 and 7 on the GDS, or holds itself out as providing specialized care for persons with dementia, such as Alzheimer's disease, in a dedicated setting.

Regulatory Insufficiency - A violation of a statutory or rule provision within the Code of Iowa (2011) or the 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 statutory or rule violations. The plan should identify how and by what date each regulatory insufficiency will be corrected, and what measures will be taken to ensure the problem does not recur. The plan is due to DIA within ten (10) working days of the program's receipt of a Complaint/Incident Investigation Report. Depending on the circumstances, DIA may revisit the assisted living program to confirm progress in fulfilling a plan's corrective measures.

Overview: *In preparing this report, the following information was considered:*

Current Program Census

Assisted Living Programs are defined by the type of population served. The census numbers below were provided by the Program at the time of the on-site visit.

General Population Program	
Number of tenants without cognitive disorder:	<u>55</u>
Number of tenants with cognitive disorder:	<u>0</u>
Total Population of Program at time of on-site	<u>55</u>
TOTAL census of Assisted Living Program	<u>55</u>

Program History – The Program received regulatory insufficiencies in the area of Medications during this recertification period

Complaint/Incident Investigation – The Complaint/Incident investigator(s) made the observations detailed in the following areas:

A. Tenant Rights

Complaint/Incident Allegation: It was alleged the program had bed bugs and tenant's belongings were discarded.

- Monitoring Observation: The Director was interviewed and was asked about recent tenant concerns. The Director indicated the program recently began feeding the birds per tenant request and was storing bird seed in a sealed container in the mechanical room. The Director, Staff #1 Universal Worker (UW), and Staff #2 UW reported no observed bugs coming from the bird seed.

The Director stated crickets were a problem in the fall time of the year, but were successfully controlled because Maintenance sprayed the outside of the building. On rare occasions, an ant was seen.

Maintenance was interviewed and stated granules were put down outside the building three times a year: spring, summer, and fall. The granules controlled crickets. Maintenance reported seeing an occasional ant but nothing of concern.

The Director stated Tenant #1 had a mattress infested with bed bugs. The program disposed of the mattress, and Tenant #1 did not want a new mattress. Tenant #1 purchased two new recliners to replace the mattress. The program hired an outside pest control company to spray for bugs. The Director did not recall the date, but the pest control company sprayed, returned two weeks later for a second application, and the program was expecting a third treatment. Tenant #1 received the new chairs after the second application by the pest control company.

The Director reported the pest control company looked at the apartments above and beside Tenant #1's apartment and found no bed bugs. The Nurse also indicated the apartments above and beside Tenant #1's apartment were checked for bugs.

At the same time, Tenant #2 also complained of bed bugs. Tenant #2's apartment was located on the same floor as Tenant #1 but down the other hallway. Tenant #2's apartment was also treated by the pest control company.

The Nurse was interviewed and stated Tenant #2 had been to see the physician several times and received treatment for scabies, but then believed the problem had been fleas. The Nurse reported there were no other tenants with any kind of skin condition or bites. The Nurse did not observe any bites on Tenant #1.

According to the Director, Tenant #1 was a very clean person and would have the bed stripped so that housekeeping could wash the sheets. Tenant #1 made his/her own bed. It was reported Tenant #1 usually shopped at a second-hand store. The Director also reported Tenant #2 frequently had a visitor who spent nights in the homeless shelter.

Staff #1 UW reported Tenant #2 had scabies and received medication for it, although it may have been fleas. Tenant #2's apartment was sprayed. Tenant #1 had bed bugs and bugs were seen on the bed after Tenant #1 complained of the bugs. Staff #1 reported Tenant #1's clothing was washed, the mattress and furniture was disposed of, and a pest control company came in to spray the apartment twice. New furniture was received after the spraying was completed. Staff #1 knew of no other complaints of bugs.

Staff #2 reported Tenant #2 was successfully treated "a month ago" for scabies. According to Staff #2 a family member of Tenant #2 thought Tenant #2 may have had bed bugs and not scabies, although that was not confirmed. Staff #2 reported Tenant #1 had bed bugs "a couple weeks ago". The old furniture was removed and new furniture was brought in. An outside company came in and sprayed for the bugs. Staff #2 was not aware of any other complaints of bugs.

A housekeeper was interviewed. She stated there were occasionally flies and ants in the building. The flies were in the window sills of the apartments, and ants were seen only occasionally. The program sprayed for the ants. The housekeeper reported she had not seen any fleas or bed bugs. The housekeeper had received no complaints of bugs.

The service man from the pest control company was contacted. He was unsure of the dates, but reported he had been at the program twice. The service man stated he was called for bed bugs and saw bugs in a room. The room was treated with Temprid. The service man reported he also treated another room for fleas "in case" but did not see any. The service man reported he came back two weeks later and did not treat the room with suspected fleas because none were seen on the first visit. There was no evidence of bugs. The service man stated he treated the bed bug room "in case" there were eggs present, but no bugs were seen on the second visit. The service man reported no further treatment was required.

The program provided a copy of the invoice from the pest control company dated 7-18-13 which indicated the purpose of the visit was bed bugs and fleas.

Tenant #1, an 82 year-old, was admitted on 11-13-07 and had diagnoses of: Gastritis, Gastroesophageal Reflux Disease, Parkinson's Disease, Coronary Artery Disease, Mild Mental Retardation, Peripheral Vascular Disease, and Anxiety. Tenant #1 was staged at one on the Global Deterioration Scale (GDS) which indicated no cognitive decline. A review of the health evaluation dated 8-1-13 documented no issues with Tenant #1's skin. Service notes were reviewed for three months with no documentation of skin issues.

Tenant #1 was interviewed and stated a housekeeper indicated there were no bedbugs. Tenant #1 stated the mattress was not very good and was dirty. Tenant #1 stated bed bugs were found and the apartment was treated. New furniture was purchased after the treatment. Tenant #1 reported on the advice of a physician, the head should be elevated at night. Tenant #1 stated recliners were better than a bed and was happy with the recliners. Tenant #1 stated one bug was found "a couple weeks ago" and Tenant #1 killed it. Tenant #1 reported there were no other bugs seen recently.

The monitor observed the apartment to be neat and clean with no odors. There was no bed in the apartment; there were two recliners in the living room and one in the bedroom. The furniture and apartment was observed and no bugs were seen. Tenant #1 denied having any bug bites.

Tenant #2, a 67 year-old, was admitted on 10-1-11 and had diagnoses of: Schizophrenia, Depression, Osteoporosis, Hypertension, and Bilateral Lower Leg Edema. Tenant #2 was staged at one on the GDS which indicated no cognitive decline. A review of the health evaluation dated 8-1-13 documented no open areas to the skin. Service notes dated 8-1-13 indicated Tenant #2 frequently had redness and rashes on the skin. Physician's orders dated 6-18-13 and 7-2-13 documented medication given for scabies treatment.

Tenant #2 was interviewed and stated treatment had been given for scabies and then it was thought fleas causing the skin irritation. Tenant #2 stated the apartment had been treated. Tenant #2 stated she thought she felt bites and saw fleas as dark spot on socks on the day prior to the monitoring visit. Tenant #2 was observed to be wearing white support stockings with no evidence of bugs.

The monitor observed the apartment to be neat and clean with no odors. The bedroom contained a bed and there was furniture in the living room and kitchen. The living room and bedrooms were carpeted. The furniture and the apartment were observed and no bugs were seen.

The program reported having one apartment with bed bugs and another apartment with possible bed bugs. A pest control company was contacted and bed bugs were seen in one apartment. Both apartments were treated. Furniture was removed as needed and Tenant #1 stated recliners were preferred. No bugs were seen on a follow-up visit. The program took action to treat the bed bugs.

While a deviation from the requirements of the rules was found, it did not meet the standard set forth in rule 67.10(3) for determining that a regulatory insufficiency exists.

- Regulatory Insufficiency: None noted.