IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

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Complaint/Incident Intake #: 46497-C

May 2, 2014

Ms. Mary Keen, Director
Bickford Cottage Urbandale
5915 Sutton Place
Urbandale, IA 50322

RE: Final Complaint/Incident Investigation Report – Bickford Cottage Urbandale, Urbandale, IA

Dear Ms. Keen:

Enclosed is the **Final Complaint/Incident Investigation Report** from the on-site monitoring visit of April 24, 2014, 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 515/281-7039 or **Rose.Boccella@dia.iowa.gov**

Sincerely,

Rose Boccella

Rose Boccella
Program Coordinator
Adult Services Bureau

Enclosure

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

Assisted Living Program:

Mary Keen, Director
Bickford Cottage Urbandale
5915 Sutton Place
Urbandale, IA 50322

Complaint/Incident Intake #: 46497-C

Date of Complaint/Incident Investigation:

April 24, 2014

Monitor(s):

Margaret Kaltefleiter, RN MS

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.

Dementia-Specific Program by Definition	
Number of tenants without cognitive disorder:	15
Number of tenants with cognitive disorder:	9
Total Population of Program at time of on-site	24

Dementia-Specific Program by Dedication	
Number of tenants without cognitive disorder:	0
Number of tenants with cognitive disorder:	14
Total Population of Program at time of on-site	14
TOTAL census of Assisted Living Program	38

Program History – The program received regulatory insufficiencies in the areas of: Medications, Service Plan and Dementia Specific Education during the Recertification, Complaint (39691-C) and Incident (39501-I) Investigation of July 10 and 11, 2012. During the August 20, 2012 Incident Investigation (40147-I), the program received regulatory insufficiencies in the areas of Policies and Procedures and Structural. The program received regulatory insufficiencies in the areas of Tenant Rights and Staffing during the October 9, 2012 Complaint Investigation (41110-C). During the June 4, 2013 Incident Investigation (43871-I) the program received a regulatory insufficiency in the area of Criteria for Admission and Retention. During the Incident Revisit (43871-IR1), the program received a regulatory insufficiency in the area of Structure. The program did not receive any regulatory insufficiencies during the October 24, 2013 Incident Investigation (45700-I).

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 a nurse told staff to give an as needed medication to calm a tenant, who wasn't upset. Later staff was told to wake the tenant for a holiday party.

- Monitoring Observation: Three tenant files were reviewed.

  Tenant #1, a 90 year old, was admitted on 11-3-08 and diagnoses include: Alzheimer's, Sepsis, Urinary Tract Infection (UTI), Dehydration, Depression, Hypertension (HTN) and Hyperlipidemia. Tenant #1 was staged at a six on the Global Deterioration Scale (GDS) which indicated severe cognitive decline. Tenant #1 resided in the dementia unit. According to Progress Notes dated 12-11-13 at 9:30 a.m., staff alerted the nurse of a rash to the left flank area. A red rash with fluid filled

sides was noted. Tenant #1's physician was called; Shingles diagnoses with a new order was received. A physician order indicated Acyclovir 400 mg three times a day for 10 days was ordered for shingles on 12-11-13. According to Tenant #1's Medication Administration Record (MAR), Tenant #1 had an as needed order for Acetaminophen 325 mg. tab to take two tablets by mouth every eight hours as needed for pain or fever. According to an Activity Calendar, a tenant Christmas party was held on 12-11-13 at 6:00 p.m. Tenant #1 did not receive any as needed medication on 12-11-13.
Staff #1 was interviewed and stated the Nurse had never asked her to give an as needed medication when it was not needed and had not asked her to give an as needed medication to someone who was not upset.

The Nurse was interviewed and stated she had never asked staff to give as needed medications if they were not indicated and had not asked staff to give an as needed medication to someone who was not upset. She stated Tenant #1 was diagnosed with Shingles and initially slept a lot at first and then was given over the counter Tylenol as needed.

The Director was interviewed and stated the Nurse did not ask staff to give as needed medication when not needed and did not ask staff to give as needed medications to tenants who were not upset.

Per review of Tenant #1's file, review of Tenant #1's MAR, review of the December Activity Calendar and interviews with Staff #1, the Nurse and Director did not indicate tenants were given as needed medications when not needed.

- Regulatory Insufficiency: None noted.

B. Medications

Complaint/Incident Allegation: It was alleged a tenant with a UTI did not receive medication needed to treat the infection and a month had gone by since the UTI was diagnosed.

- Monitoring Observation: Three tenant files were reviewed.

Tenant #2, an 82 year old, admitted on 12-9-13 and diagnoses include: History of Kidney Transplant, HTN, Immune Deficiency Disorder, Coronary Artery Disease, Renal Disorder, Cancer, Arthritis and Glaucoma. According to a Physician Laboratory Order dated 1-27-14, Tenant #2 had a standing order for a monthly urinalysis and a monthly urine culture if needed. According to a physician order faxed on 3-10-14 and noted at 8:20 a.m. Ciprofloxacin HCL 250 mg oral tablet was to be given every 12 hours daily for 14 tablets. The March MAR indicated the first dose of Ciprofloxacin was administered at 8:00 p.m. on 3-10-14, and given every 12 hours for the following seven days as ordered.

Tenant #3, an 89 year old, admitted on 5-24-07 and diagnoses include: Senile Dementia, Chronic Obstructive Pulmonary Disease, Chronic UTI's, Gastric Esophageal Reflux Disease and HTN. Tenant #3 was staged at a six on the GDS

which indicated severe cognitive decline. Tenant #3 resided in the dementia unit. According to the Progress Notes dated 12-10-13 at 10:00 a.m., a telephone order was received per request for a UA with C & S as Tenant #3 had foul smelling urine and noted weakness. On 12-13-13 at 8:00 p.m. the C & S was received and faxed to the physician. On 12-16-13 at 11:00 a.m. a new order for an antibiotic (ATB) was received and faxed to the pharmacy. Tenant #3 was positive for a UTI which was chronic. According to a physician order dated 12-16-13 an order for Macrobid one orally twice a day for ten days was ordered for a UTI. The December 2013 MAR indicated the first dose of Macrobid was administered at 4:00 p.m. on 12-16-13, and given 2 times per day for the following 10 days as ordered.

Staff #1 and the Nurse were interviewed and stated ATBs were received immediately when needed for treatment of a UTI and no one had ever gone a month without receiving their ATB.

The Director was interviewed and stated to her knowledge there were no problems at all with receiving medications on time since the pharmacy used back up staff. She stated no tenant had ever gone a month without receiving their ATB.

Per review of Tenant #2 and #3s' files, review of Tenant #2 and #3s' MARs, interviews with Staff #1, the Nurse and Director indicated tenants with a UTI received medication to treat the infection as soon as ordered.

- Regulatory Insufficiency: None noted.