IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

HEALTH FACILITIES DIVISION
Lucas State Office Building
321 East 12th Street
Des Moines, IA 50319-0083
(515) 281-4115 Phone
(515) 242-5022 Fax

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

Complaint/Incident Intake #:
56953-C

February 8, 2016

Ms. Dana Fuller, Executive Director
Sunnybrook at Muscatine
3515 Diana Queen Drive
Muscatine, IA 52761

RE: Final Complaint/Incident Investigation Report, Sunnybrook at Muscatine, Muscatine, Iowa

Dear Ms. Fuller:

Enclosed is the **Final Complaint/Incident Investigation Report** 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, following an investigation by DIA on **January 27 - 29, 2016.** The Report notes Regulatory Insufficiencies in the area(s) of: Tenant Rights and Food Service.

Each Regulatory Insufficiency requires that the Program submit a written Plan of Correction (POC).

In preparing the POC, please use the tenant identifiers from the Report, i.e. Tenant #1, when reference is made to specific tenants. If your response includes a specific tenant's assessment or service plan, it is the Program's responsibility to conceal the tenant's name in order to maintain the tenant's anonymity. Your response shall include the following:

1. Elements detailing how the Program will correct each regulatory insufficiency.
2. What measures will be taken to ensure the problem does not recur.
3. How the Program plans to monitor performance to ensure compliance.
4. The date by which the regulatory insufficiency will be corrected.

Please note that all regulatory insufficiencies must be **corrected within 30 days of the date of the exit conference**; however, there may be situations where the timeframe may be shortened or lengthened, at the discretion of the department.

The POC must be submitted/emailed to DIA to my attention within ten (10) working days of receipt of this letter. It may be necessary for DIA to revisit the Program to confirm progress in fulfilling the POC's corrective measures.

As provided by IAC rule 481-67.14, you are afforded one opportunity to refute cited regulatory insufficiencies through the informal conference process. A request for an informal conference must be made within 20 working days of the notice or service of this letter and the final report. Please refer to rule 67.14 for more information.

If you have any questions in regard to 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

DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	S0288	A. BUILDING _____ B. WING _____	C 01/29/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SUNNYBROOK AT MUSCATINE	3515 DIANA QUEEN DRIVE MUSCATINE, IA 52761

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	481-67 Initial Comments Assisted Living Programs are defined by the type of population served. The census numbers were provided by the Program at the time of the on-site. General Population Program Number of tenants without cognitive disorder: 35 Number of tenants with cognitive disorder: 0 Total Population of Program at time of on-site: 35 Dementia-Specific Program by Dedication Number of tenants without cognitive disorder: 2 Number of tenants with cognitive disorder: 12 Total Population of Program at time of on-site: 14 TOTAL census of Assisted Living Program: 49 An investigation of Complaint #56953-C was completed. There were regulatory insufficiencies cited related to Complaint #56953-C and during the course of the investigation.	A 000		
A 012	481-67.3(1) Tenant Rights 481-67.3 Tenant rights. All tenants have the following rights: 67.3(1) To be treated with consideration, respect, and full recognition of personal dignity and autonomy. This REQUIREMENT is not met as evidenced by:	A 012		

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A 012	Continued From page 1 Based on review of tenant files, staff interviews, staff statements and review of Program documents the Program failed to provide tenant rights including: to treat tenants with consideration, respect, and full recognition of personal dignity and autonomy for three of five tenant files reviewed (Tenants #1, #2 and #3). Per two staff statements and a concern voiced by a family member one staff allegedly did not treat tenants with consideration, respect and full recognition of personal dignity and autonomy. (Complaint #56953-C) 1. Tenant #1, a 94 year old, was admitted on 6-18-15 and diagnoses included: cerebral vascular accident, gastroesophageal reflux disease, osteoporosis, peripheral vascular disease, congestive heart failure and atrial fibrillation. Tenant #1 was staged at a four on the Global Deterioration Scale (GDS), which indicated moderate cognitive decline Tenant #1 resided in the dementia unit. Tenant #1 was discharged on 12-21-15. 2. Tenant #2, a 99 year old, was admitted on 11-3-13 and diagnoses included: dementia, overactive bladder and hypothyroidism. Tenant #2 was staged at a five on the GDS, which indicated moderately severe cognitive decline. Tenant #2 resided in the dementia unit. 3. Tenant #3, a 93 year old, was admitted on 7-13-15 and diagnoses included: muscle weakness, atrial fibrillation and ostomy. Tenant #3 was staged at a four on the GDS, which indicated moderate cognitive decline. Tenant #3 resided in the dementia unit. 4. Staff A, a caregiver, was hired on 10-30-12.	A 012		

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A 012	Continued From page 2 Review of Staff A's file indicated there was a Counseling Statement/Corrective Action Form dated 12-7-15. According to the document, Staff A received the notice of unsatisfactory work issued for the following reasons: work performance, unsatisfactory interpersonal skills and violation of company policy. Staff A was suspended without pay immediately until the investigation was completed. The examples included: allegations that Staff A yelled at tenants, called tenants names, allegations of being rude and Staff A told tenants to "shut up." Also an allegation that Staff A told a tenant that Staff A was going to write up the tenant so the tenant would have to go to a nursing home. Staff A's file indicated there was also a Verbal Warning Tracking Form dated 12-17-15. According to the document, a family member voiced concerns about Staff A's attitude and the way Staff A spoke to a tenant. 5. Staff B, a caregiver, provided a written and signed statement (dated 12-6-15). The statement written by Staff B alleged the following: on multiple occasions Staff A called Tenant #3 a name and on multiple occasions Staff A told Tenant #1 and Tenant #2 to "shut up." On several occasions Staff A called Tenant #1 various names. On a couple of occasions Staff A dumped out Tenant #1's juice that Tenant #1 was drinking in Tenant #1's room. Staff A "constantly yells" at Tenant #1 and Tenant #3 and told them to leave Staff A alone. On multiple occasions Staff A told Tenant #1 that Staff A was going to write up Tenant #1 so Tenant #1 would get sent to a nursing home. Staff A made a comment about Tenant #2 and how Tenant #2 should "hurry up and die." It happened on a daily basis, Staff B could not remember everything and it was just	A 012		

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A 012	Continued From page 3 some of the things Staff B could remember. Staff A also took multiple breaks during the day and took an hour lunch break. 6. Staff C, a caregiver, provided a written and signed statement (dated 12-6-15). The statement written by Staff C alleged the following: Staff A called tenants names and cursed at them many times. When Staff A needed to redirect tenants Staff A was not very nice and raised Staff A's voice at them. Staff A sat on the couch and ate while the other care workers served and cleaned up from dinner. 7. Staff A, a caregiver, provided a written statement and signed statement (dated 12-11-15). The statement written by Staff A indicated the allegations Staff A was being accused of were completely untrue. 8 According to an interview with the Executive Director, two staff made allegations regarding Staff A. Staff B alleged Staff A was mean to tenants and threatened a tenant with going to a nursing home Staff C also wrote a statement. The Executive Director, the Director of Nursing (DON) and the Resident Care Coordinator met with Staff A. Staff A denied the allegations and was told Staff A would be suspended for three days. The Executive Director was not aware of any conflict between the staff involved. The Executive Director indicated two different employees alleged Staff A was mean to tenants. The Executive Director said Staff B and Staff C were not friends. 9. According to an interview with the DON, Staff B brought the allegations regarding Staff A to the DON's attention. Staff C also came forward with allegations. Staff A was put on a three day	A 012		

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A 012	Continued From page 4	A 012		

suspension until the investigation was completed. When it was discussed with Staff A, Staff A did not confirm or deny the allegations. There had been no issues in the past regarding Staff A's treatment of tenants and no other staff came forward with allegations. Staff B was described as a good employee and the DON was not aware of any conflict between Staff A and Staff B. Staff C was described as a good employee and Staff C did not work a lot of hours. There was a connection regarding a person outside of work between Staff A and Staff C; however, the DON indicated she did not feel Staff C's statement was out of viciousness.

10. According to an interview with the Resident Care Coordinator, the DON contacted the Resident Care Coordinator and said staff had come to the DON with concerns regarding Staff A's attitude and how Staff A spoke to tenants. The Executive Director and the Resident Care Coordinator met with Staff A and Staff A denied the allegations. Staff A was put on suspension pending the investigation. When Staff A returned to work Staff A was assigned to the general population area of the building. The Resident Care Coordinator also spoke with Tenant #2's family member who had voiced a complaint regarding how Staff A spoke in a rude and abrupt manner towards Tenant #1.

11. According to the Program's January 2016 schedule, Staff A was scheduled in the general population area of the building. Previous schedules for the early part of December and November 2015 indicated Staff A was typically scheduled in the dementia unit. Tenants #1, #2 and #3 resided in the dementia unit.

12. According to the Program's policy regarding

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A 012	Continued From page 5 tenant rights, each tenant or tenant's designated representative should be given a copy of their rights and responsibilities. The Bill of Rights indicated tenants had the following rights including: to be shown consideration and respect, to be treated with dignity and to exercise autonomy.	A 012		
A 104	481-69.28(5) Food Service 481-69.28(231C) Food service 69.28(5) Personnel who are employed by or contract with the program and who are responsible for food preparation or service, or both food preparation and service, shall have an orientation on sanitation and safe food handling prior to handling food and shall have annual in-service training on food protection. This REQUIREMENT is not met as evidenced by: Based on review of staff files, staff interviews and review of Program records the Program failed to provide an orientation on sanitation and safe food handling prior to handling food and an annual in-service training on food protection for staff who were employed by or contract with the Program and who were responsible for food preparation or service, or both food preparation and service for three of five staff files reviewed (Staff A, D and E). One staff did not have an orientation on sanitation and safe food handling prior to handling food and two staff did not have an annual in-service training on food protection. (During the course of the investigation) 1. Staff A, a caregiver, was hired on 10-30-12.	A 104		

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A 104	Continued From page 6 Staff A had food safety training last documented on 1-16-14. Staff A did not have an annual in-service training on food protection. 2. Staff D, a caregiver, was hired on 11-23-15. Staff D did not have an orientation on sanitation and safe food handling prior to handling food. 3. Staff E, a caregiver, was hired on 8-1-14. Staff E had food safety training last documented on 8-5-14. Staff E did not have an annual in-service training on food protection. 4. According to an interview with the Director of Nursing, Staff A, D and E served food; however, did not prepare food. 5. According to an interview with the Executive Director, Staff A, D and E served food; however, did not prepare food. 6. According to the Program's policy regarding employee training, food safety training should be provided upon hire and annually.	A 104		

Iowa Department of Inspections and Appeals

Complaint/Incident Intake# 56953-C

Plan of Correction

A 012:

During our staff meeting February 10, 2016 we reviewed with all employees the resident bill of rights that is in accordance with rule 67.3. It was read to them as well as they all received a copy. Examples were also given of violations of residents rights so it is clearly understood. We have explained to our caregivers that this kind of violation will not be tolerated and will result in disciplinary action up to and including termination.

A copy of our bill of rights is included with this plan of correction as well as a list of employees who received it. This has been corrected as of 2/10/16.

To assure our staff continue to care for our residents in accordance of rule 67.3 we have moved our Resident Care Coordinator to our memory care unit so there is supervision there. She will fluctuate between shifts to assure we do not violate any resident rights.

A 104:

New hires will complete our food safety training during their orientation as well as annual food safety compliance. This information will now be tracked in our computer system, which will be audited quarterly, so it is easier to track this compliance and when annual trainings are due. This compliance has been started in our computer system and will be completed by 2/29/16. New hires will continue to

complete our food safety training as they are hired during their orientation period.

Dana Fuller

Dana L. Fuller

Executive Director
Sunnybrook at Muscatine
3515 Diana Queen Drive
Muscatine, Iowa 52761
563-263-5108

GRIEVANCES & COMPLAINTS

THIS COMMUNITY TAKES ALL COMPLAINTS AND GRIEVANCES SERIOUSLY. MANAGEMENT WILL REVIEW ALL SUCH ISSUES AND FULLY INVESTIGATE ALL SUCH ISSUES IMMEDIATELY. MANAGEMENT WILL TAKE ALL NECESSARY ACTION TO RESOLVE THE PROBLEM ON SUBSTANTIATED COMPLAINTS OR GRIEVANCES WITHIN 72-HOURS. IF THE COMPLAINT/GRIEVANCE IS NOT RESOLVED AT THIS LEVEL, THE FOLLOWING STEPS MAY BE TAKEN:

- REFER THE COMPLAINT TO FRONTIER MANAGEMENT, LLC, 7420 SW BRIDGEPORT RD., SUITE 105, PORTLAND, OR 97224; PHONE 503-443-1818.
- REFER THE COMPLAINT TO THE STATE OMBUDSMAN AT 1-866-236-1430.
- REFER THE COMPLAINTS TO THE DEPARTMENT OF HUMAN SERVICES – 1-800-362-2178.

ALL DOCUMENTATION REGARDING THE PROBLEM WILL BE KEPT ON-SITE TO INCLUDE THE INVESTIGATION AND ACTIONS TAKEN TO RESOLVE THE COMPLAINT OR GRIEVANCES.

RESIDENT BILL OF RIGHTS

EACH RESIDENT OR RESIDENT'S DESIGNATED REPRESENTATIVE SHALL BE GIVEN A COPY OF THEIR RIGHTS AND RESPONSIBILITIES. THE BILL OF RIGHTS STATE THAT RESIDENTS HAVE THE RIGHT:

1. BE SHOWN CONSIDERATION AND RESPECT
2. BE TREATED WITH DIGNITY
3. EXERCISE AUTONOMY
4. EXERCISE CIVIL AND RELIGIOUS RIGHTS AND LIBERTIES
5. BE FREE FROM CHEMICAL AND PHYSICAL RESTRAINTS
6. BE FREE FROM PHYSICAL, MENTAL, FIDUCIARY, SEXUAL AND VERBAL ABUSE OR NEGLECT
7. HAVE FREE RECIPROCAL COMMUNICATION WITH ACCESS TO LONG TERM CARE OMBUDSMAN
8. VOICE CONCERNS AND COMPLAINTS TO PROGRAM ORALLY AND IN WRITING WITHOUT REPRISALS

9. To receive from the manager and staff of the program a reasonable response to all requests
10. Review and obtain copies of their own records
11. Receive and send mail
12. Private, unrestricted communication with others by phone, in person or by mail
13. Privacy in treatment and caring for personal needs
14. Manage own financial affairs
15. Confidentiality concerning financial, medical, and personal affairs
16. Guide in the development of ISP
17. Participate in, and appeal their discharge planning process
18. Involve family members in decision making
19. Arrange for third party services at their own expense
20. Accept of refuse services
21. Choose own physicians, dentists and other healthcare providers
22. Choose to execute advance directivities
23. Exercise choice about end of life care
24. Participate or refuse to participate in social, spiritual, or community services
25. Right to exercise choices and lifestyle as long as it does not infringe on other tenant's rights

Facility personnel must not act as a resident's guardian, conservator, trustee, or attorney in fact unless related by birth, marriage or adoption to the resident as follows: parent, child, brother, sister, grandparent, grandchild, aunt/uncle or niece/nephew. An owner, administrator or employee may act as a representative payee for the resident or serve in other roles as provided by law.

Sunnybrook at Muscatine Employee List

Employee List

Select Desired Community: Sunnybrook at Muscatine
Employee Option: Active Employees Only
Display Pay Rates Option: Do Not Display Pay Rates
Sort Option: Name

Go

Options Selected Active Employees Only, Sort By Name

Employee	ID	Status	DOH	DOB	Job Desc.	Address	City	ST	Zip	
Allison, Lorrie	ALLLL	FT	6/4/2012	5/12/1974	Caregiver	245 East Vine Street	Letts	IA	52754	(56
Anderson, Jacinda	ANDJL	FT	8/7/2014	3/10/1997	Dietary Aide	514 W 6th St	Muscatine	IA	52761	(31
Armintrout, Rachel	ARMRM	FT	2/21/2014	1/26/1972	Caregiver	1102 Mulberry Avenue	Muscatine	IA	52761	(56
Benson, Jack	BENJC	FT	7/28/2015	5/13/1994	Cook	13810 134th Ave W	Taylor Ridge	IL	61284	(56
Birkhofer, Sandra	BIRSK	FT	1/24/2012	9/23/1951	Housekeeping Staff	15 Albany Park	Muscatine	IA	52761	(56
Blodgett, Rebecca	BLORS	FT	2/14/2014	4/25/1956	Caregiver	9494 166th Street	Muscatine	IA	52761	(31
Bodman, Vanessa	BODV	PT	8/7/2015	5/18/1997	Caregiver	14104 130th St	Columbus Junction	IA	52738	
Carranza, Casandra	CARC	FT	11/23/2015	12/3/1991	Caregiver	1300 Cedar St, Apt 5	Muscatine	IA	52761	(56
Chase, Lisa	CHALA	FT	7/17/2013	1/16/1972	Caregiver	5 Marian Drive	Muscatine	IA	52761	(56
Dominguez, Maricmar	DOMM	FT	1/18/2016	1/9/1992	Dietary Aide	801 Mulberry Ave	Muscatine	IA	52761	(56
Evans, Terry	EVATL	FT	2/25/2011	7/11/1961	Housekeeping Staff	52 Boston Park	Muscatine	IA	52761	(56
French, Vickie	FREVL	PT	11/25/2014	8/18/1952	Maintenance Staff	1111 W 3rd Street	Muscatine	IA	52761	(56
Fuller, Dana	FULDL	FT	2/16/2015	12/30/1966	Executive Director	2218 Lucas Street	Muscatine	IA	52761	(56
Guevara, Lori	GUELS	FT	8/1/2014	11/16/1994	Caregiver	400 Bartlett	Muscatine	IA	52761	(56
Harper, Lynnette	HARLR	FT	11/9/2015	3/9/1973	Business Office Manager	824 Fuller Street	Muscatine	IA	52761	(56
Holt, Beth	HOLBA	FT	8/20/2012	11/29/1980	Caregiver	1715 Houser St Apt 5E	Muscatine	IA	52761	(56
Kapteina, Roy	KAPRR	FT	6/1/2010	7/10/1947	Maintenance Staff	2656 Becky Thatcher Road	Muscatine	IA	52761	(56
Keldgord, Tim	KELTC	FT	12/7/2012	7/20/1950	Activities Staff	2474 Pheasant Run	Muscatine	IA	52761	(56
Kilburn, Jacie	KILJA	PT	8/10/2015	6/29/1999	Dietary Aide	1707 Lucas St	Muscatine	IA	52761	(56
Kraklow, Melanie	KRAMA	PT	2/19/2014	3/12/1947	Activities Staff	1222 Vista Court Apt #3	Muscatine	IA	52761	
Lofgren, Maggie	LOFMG	PT	12/4/2013	3/12/1996	Caregiver	3025 Provence Lane	Muscatine	IA	52761	(56
Lowe, Miranda	LOWMG	FT	10/30/2012	5/27/1992	Caregiver	813 E 10th Street	Muscatine	IA	52761	(56
Marshman, Shelley	MARSM	FT	11/23/2015	12/2/1971	Caregiver	1321 East 5th St	Muscatine	IA	52761	(56
Martz, Derek	MARDJ	FT	1/23/2015	7/3/1980	Dietary Supervisor	708 West 8th St	Muscatine	IA	52761	(56
Mullen, Susan	MULSK	FT	7/29/2013	7/7/1968	RN/DON	970 45th St	New Boston	IL	61272	(56
Oetting, Josephine	OETJM	PT	4/28/2015	6/12/1977	Activities Staff	620 1/2 Sycamore St	Muscatine	IA	52761	(56
Phillips, Toni	PHITL	FT	1/25/2016	8/29/1997	Caregiver	245 E Orange St	Letts	IA	52754	(56
Reynolds, Julie	REYJA	FT	1/14/2011	2/14/1980	Resident Care Coordinator	3415 Steamboat Way #6	Muscatine	IA	52761	(56
Ryan, Caitlin	RYACR	FT	1/25/2016	7/5/1989	Marketing Staff	2323 Box Car Road	Muscatine	IA	52761	(56
Sanchez-Herrera, Juan	SANJJ	FT	7/21/2015	12/30/1989	Dietary Aide	207 1/2 E. 2nd Street Apt 4	Muscatine	IA	52761	(56
Schmelzer, Erin	SCHE	FT	10/14/2014	12/17/1996	Caregiver	1700 C Ave	Muscatine	IA	52761	(56
Thornton, Patti	THOPB	FT	4/15/2013	10/21/1989	Caregiver	3015 Harmony Lane, #103	Muscatine	IA	52761	(56
Van Zandt, Cali	VANCR	FT	1/10/2012	11/5/1991	Caregiver	152 1/2 Sherman St	Muscatine	IA	52761	(85
Wheeler, Marlene	WHEMK	FT	5/4/2009	12/14/1956	Caregiver	9203 162nd Street	Muscatine	IA	52761	(56
Whittington, Rylee	WHIRB	FT	1/21/2015	8/26/1996	Caregiver	122 Cook St	Muscatine	IA	52761	(56
Woods, Brittany	WOOBN	FT	1/10/2012	11/12/1991	Caregiver	723 Maiden Lane	Muscatine	IA	52761	(85
Woodward, Christy	WOOCM	FT	7/28/2015	8/3/1984	Dietary Aide	2457 Hwy 22	Muscatine	IA	52761	(56

37 Employees

Employee Sign-In List

Help Desk (Local computer issues only) 1.800.240.2821 (Option 1) - Charges Apply

For Frontier Intranet or Frontier Email questions, please contact your staff accountant.