8/16/17 8/16/17

PRINTED: 07/21/2017
FORM APPROVED

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
	S0028	A. BUILDING: _____ B. WING _____	C 07/21/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BICKFORD COTTAGE CEDAR FALLS	5101 UNIVERSITY CEDAR FALLS, IA 50613

(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	481-69 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. Dementia-Specific Program by Dedication Number of tenants without cognitive disorder: 24 Number of tenants with cognitive disorder: 15 Total Population of Program at time of on-site: 39 TOTAL census of Assisted Living Program: 39 The following regulatory insufficiency was cited during the recertification visit conducted to determine compliance with certification for an Assisted Living Program.	A 000	See attached POC 9/1/17	
A 121	481-69.30(1) Dementia Specific Education for Personnel 481-69.30(231C) Dementia-specific education for program personnel. 69.30(1) All personnel employed by or contracting with a dementia-specific program shall receive a minimum of eight hours of dementia-specific education and training within 30 days of either employment or the beginning date of the contract, as applicable. This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program failed to provide a minimum of 8 hours of dementia-specific education and training within 30 days of employment for 2 out of 5 staff files reviewed (Staff A and B). Findings follow:	A 121		

DIVISION OF HEALTH FACILITIES - STATE OF IOWA

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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A 121	Continued From page 1 1. Record review of staff files revealed the following: a. Staff A hired 2-27-16, completed a dementia case study on 3-22-16. Continued record review revealed no other trainings completed. b. Staff B hired 6-22-16, completed a dementa case study on 8-15-16. Continued record review revealed .5 hours of online training on 10-12-16, and 7 hours of online training on 10-19-16. The Program failed to provide the required eight hours of dementia specific training within 30 days of employment. 2. Interview with the Director on 4-11-17 at 11:42 am confirmed Staff A and B did not have the required 8 hours of training within 30 days of hire.	A 121		

06/8/1017

8/16/17

Plan of Correction
Bickford Cottage of Cedar Falls

A 121- Dementia specific Education for Program Personnel

Regulatory Insufficiency: The Program failed to provide the required eight hours of dementia specific training within 30 days of employment

Plan of Correction:
The insufficiencies will be corrected as follows:

- Staff A completed all 8 hours of specific dementia training on 04/01/17
- Staff B resigned on 04/15/2017 before completion of dementia specific training.

The following measures will be taken to ensure the problem does not recur:

- Upon hire, all program staff will complete 8 hours of dementia specific education and training within 30 days of employment.
- The Initial Orientation Checklist will be utilized within the 30 days to keep record of completion of training
- Director and Assistant director have online Taleo will which notify them by email every week to update training on staff

The program will monitor performance to ensure compliance as follows:

- The Director is responsible to ensure compliance by reviewing new hire orientation check list weekly for the first 30 days
- Divisionals will monitor compliance through Quality audits, as well.

Date deficiencies corrected by: 04/01/2017