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
	S0318	A. BUILDING: _____ B. WING _____	C 12/28/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ROSE OF COUNCIL BLUFFS	2306 SHERWOOD DRIVE CO BLUFFS, IA 51503

(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	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: 72 Number of tenants with cognitive disorder: 0 Total Population of Program at time of on-site: 72 TOTAL census of Assisted Living Program: 72 During complaint investigation #72870-C, the following regulatory insufficiencies were written:	A 000		
A 013	481-67.3(2) Tenant Rights 481-67.3 Tenant rights. All tenants have the following rights: 67.3(2) To receive care, treatment and services which are adequate and appropriate. This REQUIREMENT is not met as evidenced by: Based on interview and record review, Program staff failed to communicate change in a tenant's condition to the Program's Registered Nurse (RN). This affected 1 of 3 tenants reviewed (Tenant #2). Findings follow: Record review on 12/28/17 revealed Tenant #2's Team Care Plan dated 12/11/17 listed diagnoses as: hypertensive chronic kidney disease, central	A 013	Administrator created Care Communication notes that are to be filled out at the conclusion of each visit by therapists and given to the Program RN for review and are readily available for all disciplines. Director of Therapy educated therapists to complete Care Communication notes and to be sure to notate any changes to ensure Program RN notification regardless of how minor. Administrator educated Program RN on expected use and availability of Care Communication notes	12/29/2017 12/29/2017 12/29/2017

3/9/18

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A 013	Continued From page 1 cord syndrome, atherosclerotic heart disease, type 2 diabetes, anemia, and restless leg syndrome. Further record review revealed Tenant #2's Physical Therapy Progress Note dated 11/29/17 stated, "Increased edema RLE (right lower extremity), mild redness and temperature on that side vs. left to touch." Physical Therapy Progress Notes dated 12/4/17 stated, "Pt (patient) reports increased pain and edema in R (right) LE (lower extremity) (knee to toes). Observed L (left) LE and noted increased edema. No weeping noted. " Physical Therapy Progress Notes dated 12/6/17 stated, "went to ER for right leg edema, diagnosed with peripheral edema, on Keflex 500 mg 1 capsule BID (twice a day) for 10 days." When interviewed on 12/28/17 at 3:00 p.m., the Nurse Administrator confirmed the Program Physical Therapist should have communicated to the Program RN the condition of Tenant #2's ankles and his/her complaint of increased pain in the days leading up to Tenant #2's visit to the ER. RN A reported she didn't become aware of Tenant #2's lower extremity edema until six days after the Physical Therapist first noticed the change.	A 013		
A 086	481-69.26(3)a Service Plans 481-69.26(231C) Service plans. 69.26(3) When a tenant needs personal care or health-related care, the service plan shall be updated within 30 days of the tenant's occupancy and as needed with significant change, but not less than annually. a. If a significant change triggers the review and update of the service plan, the updated service	A 086	Administrator educated Program RN of requirement to update Service Plan with significant changes which includes reported infections. Administrator and Program RN will review service plan same day with changes of condition that need added to service plan and obtain appropriate signatures indicating inclusion in plan.	12/29/2017 12/29/2017

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A 086	Continued From page 2 plan shall be signed and dated by all parties. This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program's Registered Nurse (RN) failed to update a tenant's service plan with change of condition. This affected 1 of 3 tenants reviewed (Tenant #2). Findings follow: Record review revealed Tenant #2's Physical Therapy report dated 12/6/17 stated Tenant #2 had been to the Emergency Room (ER) for peripheral edema in lower extremities and was placed on antibiotics. Tenant #2's service plan in place at the time of the report was updated and signed on 5/4/17. On 12/11/17, Tenant #2's service plan was updated, however the plan failed to mention anything regarding Tenant #2's peripheral edema or treatment. When interviewed on 12/28/17 at 3:00 p.m., RN A confirmed no updates had been made to Tenant #2's service plan until 12/11/17 and the updated plan failed to address his/her peripheral edema in the lower extremities. When interviewed on 12/28/17 at 3:00 p.m., the Nurse Administrator also confirmed Tenant #2's service plan should have been updated on 12/5/17 when he/she returned from the ER visit for the edema.	A 086		

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A 094	Continued From page 3	A 094		
A 094	481-69.27(1)a Nurse Review 481-69.27(231C) Nurse review. If a tenant does not receive personal or health-related care, but an observed significant change in the tenant's condition occurs, a nurse review shall be conducted. If a tenant receives personal or health-related care, the program shall provide for a registered nurse: 69.27(1)a To monitor, at least every 90 days, or after a significant change in the tenant's condition, any tenant who receives program-administered prescription medications for adverse reactions to the medications and to make appropriate interventions or referrals, and to ensure that the prescription medication orders are current and that the prescription medications are administered consistent with such orders. This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program nurse failed to conduct and document nurse evaluation when change of condition occurred in 1 of 3 tenants reviewed (Tenant #2). Findings follow: Record review on 12/28/17 revealed Tenant #2's Physical Therapy Progress Note dated 11/29/17 stated, "Increased edema RLE (right lower extremity), mild redness and temperature on that side vs. left to touch." Physical Therapy Progress Notes dated 12/4/17 stated, "Pt (patient) reports increased pain and edema in R (right) LE (lower extremity) (knee to toes). Observed L (left) LE and noted increased edema.	A 094	Administrator educated Program RN that assessment is required immediately with change of condition and documented in EMR. Administrator will ensure new diagnosis entered same day of receiving MD signed documentation into EMR. Administrator or Program RN will perform assessment same day of discovery of change of condition and adjust monitoring to ensure positive outcome.	12/29/2017 12/29/2017 12/29/2017

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A 094	Continued From page 4 No weeping noted. " Physical Therapy Progress Notes dated 12/6/17 stated, "went to ER for right leg edema, diagnosed with peripheral edema,, on Keflex 500 mg 1 capsule BID (twice a day) for 10 days." Further record review revealed Tenant #2's Team Care Plan dated 12/11/17 listed diagnoses as: hypertensive chronic kidney disease, central cord syndrome, atherosclerotic heart disease, type 2 diabetes, anemia, and restless leg syndrome. When interviewed on 12/28/17 at 3:00 p.m., Registered Nurse (RN) A said she didn't find out Tenant #2 had issues with his/her lower extremities until a direct care staff told her on 12/5/17, the day Tenant #2 went to the ER. She reported she looked at Tenant #2's lower extremities upon return from the ER, however she failed to document the assessment or any recommendation for follow-up assessments. She did report, however she completed nursing assessment on 12/11/17 and noted pitting edema in both lower extremities from mid-calf to the ankles. When interviewed on 12/28/17 at 3:00 p.m., the Nurse Administrator confirmed RN A should have documented her assessment performed on Tenant #2 on 12/5/17 and continued to monitor the tenant's condition.	A 094		