3/19/18

PRINTED: 03/05/2018
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
	S0135	A. BUILDING: _____ B. WING _____	03/01/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VISTA PRAIRIE AT FIELDCREST AL	2501 EAST 6TH STREET SHELDON, IA 51201

(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 for People with Dementia are defined by the population served. The census numbers were provided by the Program at the time of the on-site. General Population Number of tenants without cognitive disorder: 75 Number of tenants with cognitive disorder: 2 Memory Care Unit Number of tenants without cognitive disorder: 0 Number of tenants with cognitive disorder: 12 TOTAL Census of Assisted Living Program for People with Dementia: 89 The following regulatory insufficiencies were cited during the recertification visit conducted to determine compliance with certification for an Assisted Living Program for People with Dementia.	A 000		
A 118	481-67.19(3) Record Checks 481-67.19(135C,231B,231C,231D) Criminal, dependent adult abuse, and child abuse record checks. 67.19(3) Requirements for employer prior to employing an individual. Prior to employment of a person in a program, the program shall request that the department of public safety perform a criminal history check and the department of human services perform child and dependent adult abuse record checks of the person in this state.	A 118	Plan of Correction is attached DD — 3/15/18	

DIVISION OF HEALTH FACILITIES - STATE OF IOWA

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

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A 118	Continued From page 1 This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program failed to ensure required record checks were completed prior to employment for 1 of 8 staff reviewed (Staff A). Findings follow: Record review revealed Staff A was hired on 10-18-16. Review of the staff's Single Contact License and Background Check form revealed the background checks were completed on 11-2-16. When interviewed on 2-28-18 at 10:37 a.m. the Health Services Director confirmed this finding.	A 118		
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 8 hours of dementia training within 30 days of employment for 3 of 6 staff reviewed (Staff B, Staff C, and Staff D). Findings follow: Record review revealed the following:	A 121		

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A 121	Continued From page 2 1. Staff B was hired 4-13-17. Staff B's WestNet Learning transcript revealed 4.75 hours of dementia training completed 4-17-17 and .5 hours of dementia training completed 4-18-17. A form titled "On the Floor" Hands On Dementia Training documented Staff B completed the On the Floor Training checklist on 4-24-17, however the amount of time this training took was not indicated. 2. Staff C was hired 6-14-16. Staff C's WestNet Learning transcript revealed 5.25 hours of dementia training completed 4-17-17. No other training could be located. 3. Staff D was hired 2-10-16. Staff D's WestNet Learning transcript revealed 2.5 hours of dementia training completed 2-3-16, 1.25 hours completed 2-4-16, and 1.5 hours completed 2-10-16. No other training could be located. When interviewed on 2-18-18 at 2:26 p.m. the Staff Training Registered Nurse confirmed this finding.	A 121		
A 125	481-69.30(5) Dementia Specific Education for Personnel 481-69.30(231C) Dementia-specific education for program personnel. 69.30(5) Dementia-specific training shall include hands-on training and may include any of the following: classroom instruction, Web-based training, and case studies of tenants in the program. This REQUIREMENT is not met as evidenced by:	A 125		

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A 125	Continued From page 3 Based on interview and record review the Program failed to provide hands-on dementia training within 30 days of employment for 2 of 6 staff reviewed (Staff C and Staff D). Findings follow: Record review revealed the following: 1. Staff C was hired 6-14-16. No documentation confirming hands-on dementia training within 30 days could be located. 2. Staff D was hired 2-10-16. No documentation confirming hands-on dementia training within 30 days could be located. When interviewed on 2-18-18 at 2:26 p.m. the Staff Training Registered Nurse confirmed this finding.	A 125		

V 3/19/18

Vista Prairie at Fieldcrest Plan of Correction

A 118 481-67.19(3) Record Checks
481-67.19(135C, 231B, 231C, 231D) Criminal, dependent adult abuse, and child abuse record checks. 67.19(3) Requirements for employer prior to employing an individual. Prior to employment of a person in a program, the program shall request that the department of public safety perform a criminal history check and the department of human services perform child and dependent adult abuse record checks of the person in this state.

- Elements detailing how the Program will correct each regulatory insufficiency.
  - Individuals will not perform any employment tasks until the criminal history check and the child and dependent adult abuse record checks are completed with verification of the individual's eligibility for employment.

- What measures will be taken to ensure the problem does not recur.
  - Review the Policy and Procedure regarding criminal history/dependent adult abuse record checks
  - Each candidate for employment will be told of the need to have a completed criminal history check prior to employment.
  - The Community Business Office Manager will coordinate the completion of these background checks with the prospective employee and the department Manager.
  - Orientation will not begin until the criminal history results are returned.
  - Update the Orientation documentation form to clarify that the criminal history check must be completed pre-hire.

- How the Program plans to monitor performance to ensure compliance.
  - The Business Office Manager will audit all new employee records to verify that the employee has not begun employment prior to the criminal history results return.

- The date by which the regulatory insufficiency will be corrected.
  - March 6, 2018

DD 3/19/18

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.

- Elements detailing how the Program will correct each regulatory insufficiency.
    - The form tracking the number of hours of dementia training completed within the first 30 days of employment has been revised.

- What measures will be taken to ensure the problem does not recur.
    - Review the curriculum utilized to provide dementia training to staff to assure at least 8 hours of training will be available to each staff person within the first 30 days of employment.
    - All employees will complete at least 8 hours of dementia training within the first 30 days of employment.
    - Record the number of hours of dementia training, including the total number of hours of training.

- How the Program plans to monitor performance to ensure compliance.
    - The Staff Development Nurse will review the total number of recorded hours of dementia training on all new employee orientation checklists to assure at least 8 hours of training have been completed within the first 30 days.

- The date by which the regulatory insufficiency will be corrected.
    - March 30, 2018