

✓ 5/30/18

OK
5/29/18PRINTED: 04/25/2018
FORM APPROVED

DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: S0058	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 04/11/2018
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

HERITAGE AT NORTHERN HILLS**4002 TETON TRACE
SIOUX CITY, IA 51104**

(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. Number of tenants without cognitive disorder: 52 Number of tenants with cognitive disorder: 12 TOTAL Census of Assisted Living Program: 64 The following regulatory insufficiencies were cited during the investigation of Complaint #74593-C.	A 000	See attached POC 6/1/18	
A 014	481-67.3(3) Tenant Rights 481-67.3 Tenant rights. All tenants have the following rights: 67.3(3) To receive respect and privacy in the tenant's medical care program. Personal and medical records shall be confidential, and the written consent of the tenant shall be obtained for the records' release to any individual, including family members, except as needed in case of the tenant's transfer to a health care facility or as required by law or a third-party payment contract. This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program failed to consistently ensure the privacy of tenants. This potentially affected 64 of 64 tenants. Finding follows:	A 014		

DIVISION OF HEALTH FACILITIES - STATE OF IOWA

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: S0058	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED C 04/11/2018
NAME OF PROVIDER OR SUPPLIER HERITAGE AT NORTHERN HILLS			STREET ADDRESS, CITY, STATE, ZIP CODE 4002 TETON TRACE SIOUX CITY, IA 51104		
(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 014	Continued From page 1 When interviewed on 4/9/18 at 2:05 p.m. Staff A admitted she sent medical information via text messages. She reported she used her personal cell phone to send the information to the person on call. She acknowledged there was no way to ensure the information had been delivered and/or read by the person on call. When interviewed on 4/9/18 at 2:30 p.m. Staff B reported she used her personal cell phone to send a photo of a tenant's injury via text message to the person on call. When interviewed on 4/9/18 the Executive Director(ED) and Director of Healthcare(DOH) reported they could not say for sure that no one had sent text messages with private information from personal cell phones. The Director of Health Care confirmed she had asked staff to send photos of injuries via text messages. Record review on 4/9/18 revealed the Program's Confidentiality and Non-Disclosure Agreement. The agreement included the following statement, "To refrain from communicating information about a resident in a manner that would allow others to overhear such information or to discuss a resident's information with anyone not permitted access to such information in accordance with the Community's established policies or resident's wishes." When interviewed on 4/9/18 the ED and DOH confirmed by sending texts about tenants' personal information someone not "permitted access" could obtain tenant personal information.	A 014			

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Tenant Rights - Tag ID A014

Elements detailing how the Program will correct this regulatory insufficiency:

- The Executive Director will reimplement the Confidentiality and Non-Disclosure Agreement form to include new verbiage on line #2 stating that staff are "to refrain from communicating information verbally or by using electronic devices about a resident in a manner that would allow others to overhear or have access to such information or to discuss a resident's information with anyone not permitted access to such information in accordance with the Community's established policies or resident's wishes (e.g., friends, relatives, visitors, family members of residents, etc.).".
- The Executive Director will hold a mandatory all-staff meeting to discuss this new format on Wednesday, May 9th, 2018.
- All staff will sign the new updated version of the Confidentiality and Non-Disclosure Agreement form by June 1st, 2018

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

- All previous copies of the Confidentiality and Non-Disclosure Agreement will be adjusted to reflect the new verbiage
- All new staff members will sign the updated Confidentiality and Non-Disclosure Agreement forms upon hire and they will be kept in their electronic files
- Staff who do not adhere to the new work rules set forth in the Confidentiality and Non-Disclosure Agreement will be progressively disciplined accordingly

How the Program plans to monitor performance to ensure compliance:

- The Executive Director is the HIPPA compliance officer for this community and will investigate all possible breaches of HIPPA and will discipline staff accordingly

The date by which the regulatory insufficiency will be corrected:

- The new version of the Confidentiality and Non-Disclosure Agreement will be drafted by May 8th 2018
- The mandatory all-staff meeting to discuss these changes will be held on Wednesday, May 9th 2018
- All staff will have signed and agreed to the new format of the Confidentiality and Non-Disclosure Agreement by June 1st, 2018