

Vg/19/18 ok 8/10/18

PRINTED: 08/06/2018
FORM APPROVED

DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: S0323	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED C 07/17/2018
NAME OF PROVIDER OR SUPPLIER KENNYBROOK VILLAGE			STREET ADDRESS, CITY, STATE, ZIP CODE 200 SW BROOKSIDE DRIVE GRIMES, IA 50111		
(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: 41 Number of tenants with cognitive disorder: 0 Total population of Program at time of on-site: 41 Total population of Program at time of on-site: 41 The following regulatory insufficiency was cited during the investigation of Complaint #76644:	A 000	See attached POL 8/8/18		
A 008	481-67.2(1)e Program Policies and Procedures 481-67.2(231B,231C,231D) Program policies and procedures, including those for incident reports. A program's policies and procedures must meet the minimum standards set by applicable requirements. The program shall follow the policies and procedures established by a program. All programs shall have policies and procedures related to the reporting of incidents including allegations of dependent adult abuse. 67.2(1) The program's policies and procedures on incident reports, at a minimum, shall include the following: e. All accidents or unusual occurrences within the program's building or on the premises that affect tenants shall be reported as incidents. This REQUIREMENT is not met as evidenced by: Based on interviews and record review, the	A 008			

DIVISION OF HEALTH FACILITIES - STATE OF IOWA
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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A 008	Continued From page 1 Program failed to ensure completed incident reports following accidents or unusual occurrences. This affected 2 of 4 tenants (Tenant #1 and Tenant #2) reviewed for reported falls. Findings follow: Record reviewed on 7/17/18 revealed Tenant #1 involved in a fall incident on 5/13/18. Continued record review revealed Tenant #2 involved in fall incidents on 4/15/17, 2/9/17 and 2/3/16. Additional record review failed to produce incident reports regarding these occurrences. When interviewed on 7/16/18 at 2:45p.m. and on 7/17/18 at 10:30a.m. the Assisted Living Director confirmed incident reports were not available at the time of the complaint investigation. The Director stated she had recently been appointed Assisted Living Director in June 2018 and was not able to locate incident reports. She noted a new system of completing incident reports had been initiated since her appointment. The new system was confirmed, as 7/12/18 and 6/29/18 incident reports were available for Tenants #3 and #4.	A 008		

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POC

Complaint Investigation Date: July 16, 2018

Kennybrook Village

200 Southwest Brookside Dr.

Grimes, IA 50111

Submission of the plan of correction shall not be construed as a waiver of this provider's right to contest any and all deficiencies, nor is such submission an admission that the facts are as alleged, or that any regulatory violation occurred. The following is to be considered our Credible Allegation of Compliance.

A008; 481-67.2(1)e Program Policies and Procedures

It is the policy of Kennybrook Village with respect to all tenants residing in the community, that all accidents or unusual occurrences within the program's building or on the premises that affect tenants shall be reported as incidents and kept on file for a minimum of three years.

Correct Insufficiency

The AL Director, Ann Lorenzen, educated all staff on the policy and procedure for incidents/accident reporting including how to identify an accident or unusual occurrence. The AL Director also educated all staff on filling out the incident/accident report form; all education was completed on 8/8/18.

As part of Kennybrook Village's ongoing commitment to quality assurance the AL Director or designee will conduct random audits. Compliance will be monitored through the Quality Assurance Program.