6/5/19

PRINTED: 05/15/2019
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 |
|---|---|---|---|
| | S0265 | A. BUILDING: _____ B. WING _____ | C 05/08/2019 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| TRADITIONS AT WEST UNION | 609 HWY 150 N WEST UNION, IA 52175 |

| (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 |
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| A 000 | Initial Comments<br><br>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.<br><br>General Population<br>Number of tenants without cognitive disorder: 14<br>Number of tenants with cognitive disorder: 1<br><br>Memory Care Unit<br>Number of tenants without cognitive disorder: 0<br>Number of tenants with cognitive disorder: 10<br><br>TOTAL Census of Assisted Living Program for People with Dementia: 25<br><br>The investigation of Complaint #82714-C resulted in the following regulatory insufficiency. | A 000 | HEALTH FACILITIES<br>MAY 28 2019 | |
| A 071 | 481-69.25(1)i Tenant Documents<br><br>481-69.25(231C) Tenant documents.<br>69.25(1) Documentation for each tenant shall be maintained by the program and shall include:<br>i. When any personal or health-related care is delegated to the program, the medical information sheet; documentation of health professionals' orders, such as those for treatment, therapy, and medication; and nurses' notes written by exception<br><br>This REQUIREMENT is not met as evidenced | A 071 | 1. The program will educate the appropriate staff on the regulatory insuffieciency.<br><br>2. Education/Review of the Following:<br>A. Regulation-481-69.25 Tenant documents<br>B. Policy and Procedure-Resident Record-Documentation Task/ Progress note.<br>C. EMAR system over-View<br><br>3. An audit of communication notes will be completed 1X per week one X 1 month to validate understanding and compliance of regulation.<br><br>4. 6/18/19 | |

DIVISION OF HEALTH FACILITIES - STATE OF IOWA
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE



5/30/19

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| A 071 | Continued From page 1<br>by:<br>Based on interview and record review the Program failed to document nurses notes by exception for 3 of 3 tenants reviewed (Tenants #1, #2 and #3). Findings follow:<br><br>1. Record review on 5-7-19 and 5-8-19 of Tenant #1's file revealed a Facility to Physician Note dated 4-10-19. The note stated Tenant #1 had refused his medications 10 days over the past month and had multiple verbal outbursts over the past week. Tenant #1 also called local law enforcement and after it did not "produce the response he wanted" he refused to eat breakfast, take medications or get out of bed. The primary care provider (PCP) ordered to change his dose of Seroquel, discontinue Sertraline and start Citalopram, start Memantine 20 mg daily, and discontinue Glipizide and blood glucose monitoring. The orders were dated 4-11-19 and noted by the nurse on 4-11-19.<br><br>Review of the tenant's Master Care Plan (service plan) reflected Tenant #1 had numerous bladder infections and was diagnosed with a urinary tract infection (UTI) on 3-18-19.<br><br>Further record review revealed the April 2019 medication administration records (MARs) reflected an order for Ciprofloxacin 250 mg, twice per day for 10 days.<br><br>When interviewed on 5-8-19 at 1:45 p.m. and 2:12 p.m. the Nurse revealed the April MAR reflected an antibiotic ordered for a UTI. Tenant #1's family wanted his urine checked. It was collected at the Program. The order for the antibiotic came from a clinic. Tenant #1's family picked up the medication from a pharmacy and | A 071 | | |

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| A 071 | Continued From page 2<br>the nurse put it on the MAR from the medication bottle.<br><br>Tenant #1's Progress Notes indicated the last entry was dated 2-16-19. Nurses notes were not completed regarding the UTIs, the initiation of antibiotic therapy and completion of the medication to follow up for any further signs or symptoms. Nurses notes were also not completed related to the behavior noted in the document to the PCP and for the orders received in response to behaviors noted.<br><br>2. Record review on 5-8-19 of Tenant #2's file revealed a Facility to Physician Note dated 4-4-19. The note indicated the PCP ordered a back brace for Tenant #2 when up in the chair during the day as needed. It was ordered on 4-4-19 and noted by the nurse on 4-5-19.<br><br>Tenant #2's Master Care Plan (service plan) reflected an update on 4-5-19 for the use of the back brace.<br><br>Tenant #2's Progress Notes indicated the last entry was 3-6-19. Nurses notes were not completed when the new order was received for the back brace and with the addition of the back brace to the service plan.<br><br>3. Record review on 5-8-19 of Tenant #3's file revealed Facility to Physician Notes reflecting the following:<br>a. On 3-22-19 it was noted Tenant #3 displayed a lot of negative thoughts and the thoughts were "often disorganized and/or delusional." A new order was received to increase Thioridazine 25 mg three times per day.<br>b. On 5-1-19 it was noted Tenant #3 wanted to | A 071 | | |

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| A 071 | Continued From page 3<br>stop using her eye drops as the drops were an irritation to her eyes and skin. The PCP ordered to use Artificial Tears as needed and Tobradex every day at bedtime only.<br><br>Additional orders (telephone) from the PCP dated 3-28-19 indicated to start Melatonin 3 mg at bedtime (for sleep) and Lansoprazole 30 mg daily (for reflux). It was noted by the nurse on 4-5-19.<br><br>Tenant #3's Progress Notes indicated the last entry was 2-21-19. Nurses notes were not completed with the new orders received.<br><br>4. When interviewed on 5-8-19 at 10:23 a.m. the Nurse confirmed these findings. | A 071 | | |