

DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: S0024	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 05/29/2025	
NAME OF PROVIDER OR SUPPLIER BICKFORD COTTAGE AMES		STREET ADDRESS, CITY, STATE, ZIP CODE 2418 KENT AVE AMES, IA 50010		
(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. Number of tenants without cognitive impairment: 10 Number of tenants with cognitive impairment: 20 Total census: 30 No regulatory insufficiencies were cited during the investigation of Complaint #126990-C. The following regulatory insufficiencies were cited during the recertification visit conducted to determine compliance with certification rules for an Assisted Living Program for People with Dementia and the investigation of Complaint #127410-C	A 000		
A 345	481-67.9(4)b Staffing 67.9(4) Nurse delegation procedures. The program's registered nurse shall ensure certified and noncertified staff are competent to meet the individual needs of tenants. Nurse delegation shall, at a minimum, include the following: b. Within 30 days of beginning employment, all program staff shall receive training by the program's registered nurse(s). This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program's registered nurse failed to provide training to staff within 30 days of employment. This pertained to 2 of 4 staff reviewed (Staff A and Staff B). Findings follow:	A 345	481-67.9(4)b Staffing 67.9(4) 1. Newly hired Health and Wellness Director, Kelly Kane will delegate all caregivers prior to having them working independently within 30 days of hire. 2. Education was provided to new Health and Wellness Director upon hire on importance of delegation being completed within 30 days of hire. 3. Program will review delegations monthly.	6/7/2025

DIVISION OF HEALTH FACILITIES - STATE OF IOWA

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

TITLE

(X6) DATE

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A 345	Continued From page 1 Record review on 5/29/25 at 10:30 a.m. of staff files revealed the following: 1. Staff A was hired 8/21/24 and no registered nurse training completed within 30 days of hire could be located. 2. Staff B was hired 11/20/24 and no registered nurse training completed within 30 days of hire could be located. On 5/29/25 at 12:20 p.m. the Director confirmed these findings.	A 345		
A 361	481-67.9(4)f Staffing 67.9(4) Nurse delegation procedures. The program's registered nurse shall ensure certified and noncertified staff are competent to meet the individual needs of tenants. Nurse delegation shall, at a minimum, include the following: f. Services shall be provided to tenants in accordance with the training provided. This STANDARD is not met as evidenced by: Based on observation, interview, and record review the Program failed to administer eye drops according to the training provided. This pertained to 1 of 1 staff observed administering eye drops (Staff C). Findings follow: Observations of a medication administration pass on 5/29/25 at 11:44 a.m. revealed Staff C administer medications to three tenants. She donned gloves after the second tenant,	A 361	481-67.9(4)f Staffing 1. Staff will follow nursing delegations provided by Health and Wellness Director. 2. Health and Wellness Director, Kelly Kane re-educated staff C on eye drop administration and proper hand washing. 3. Health and Wellness Director will audit skills and cares monthly to ensure nursing delegations are being followed.	5/29/2025

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A 361	Continued From page 2 approached Tenant #1, and asked him to put his head back for his eye drops. He was seated in the dining room in a hard backed chair in an upright position and was unable to lean his head back very far. Staff A proceeded to touch the bottle to the corner of each eye to allow the drop to enter his eye. She removed her gloves, signed the medication administration record. She failed to sanitize her hands before she administered medications to the third tenant. On 5/29/25 at 12:13 p.m. the Registered Nurse confirmed staff should sanitize hands in between each tenant and the bottle of eye drops should not touch the eye. Review of Staff A's file revealed a Medication Management Course through Iowa Assisted Living Association was completed on 3/21/25. An Iowa Nurse Delegation Flowsheet dated 3/20/25 revealed hand washing steps included to wash hands when entering and exiting a tenant's apartment and to wash hands with soap and water after using gloves. Further review listed eye drop administration included to position the head back, retract the lower lid, and instill eye drop avoiding contact with the eye. On 5/29/25 at 3:45 p.m. the Director confirmed these findings.	A 361		