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 |
|---|---|---|---|
| | S0012 | A. BUILDING: _____ B. WING _____ | C 10/25/2021 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| BICKFORD COTTAGE MARSHALLTOWN | 101 NEW CASTLE RD MARSHALLTOWN, IA 50158 |

| (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<br><br>Assisted Living Programs for People with Dementia are defined by the type of population served. The census numbers were provided by the Program at the time of the on-site.<br><br>Number of tenants without cognitive disorder: 23<br>Number of tenants with cognitive disorder: 8<br><br>TOTAL census of Assisted Living Program for People with Dementia: 31<br><br>The following regulatory insufficiencies were cited during the investigation of Incident #96620-I and the recertification visit conducted to determine compliance with certification of an Assisted Living Program for people with Dementia.<br><br>No regulatory insufficiencies were cited during the investigation of Complaint #96366-C or the site infection control survey. | A 000 | POC attached<br>OK 2/15/22 | |
| A 415 | 481-67.19(3)c Record Checks<br><br>67.19(3)c If a person considered for employment has been convicted of a crime. If a person being considered for employment in a program has been convicted of a crime under a law of any state, the department of public safety shall notify the program that upon the request of the program the department of human services will perform an evaluation to determine whether the crime warrants prohibition of the person's employment in the program.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on interview and record review the Program failed to submit an evaluation to the Department of Human Services (DHS) for 3 of 8 | A 415 | | |

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| A 415 | Continued From page 1<br>staff reviewed with a criminal history (Staff A, Staff B, and Staff C). Findings follow:<br><br>Record review on 10-20-21 of staff files revealed the following:<br><br>1. Staff A was hired 6-18-2020. A Single Contact License and Background Check completed 6-17-2020 revealed a criminal history. No evaluation from DHS could be located.<br><br>2. Staff B was hired 10-8-2020. A Single Contact License and Background Check completed 10-6-2020 revealed further research was required for a possible criminal history. No evaluation from DHS could be located.<br><br>3. Staff C was hired 9-27-2020. A Single Contact License and Background Check completed 9-23-2020 revealed further research was required for a possible criminal history. No evaluation from DHS could be located.<br><br>The Director confirmed these findings on 10-21-21 at 10:12 a.m. | A 415 | | |
| A 215 | 481-69.24(1)a Involuntary Transfer from Program<br><br>69.24(1) Program initiation of transfer. If a program initiates the involuntary transfer of a tenant and the action is not the result of a monitoring, including a complaint investigation or program-reported incident investigation, by the department and if the tenant or tenant's legal representative contests the transfer, the following procedures shall apply:<br><br>a. The program shall notify the tenant or tenant's legal representative, in accordance with the | A 215 | | |

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| A 215 | Continued From page 2<br>occupancy agreement, of the need to transfer the tenant and of the reason for the transfer and shall include the contact information for the office of long-term care ombudsman.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on interview and record review the Program failed to include the contact information of the office of long-term care ombudsman (LTCO) in the discharge letter for 1 of 1 discharged tenants reviewed as a result of Incident #96620-I (Tenant #C1). Findings follow:<br><br>Record review of Tenant #C1's nursing notes revealed the following:<br>On 2-12-21 he engaged in inappropriate sexual conversation with another tenant and verbalized understanding to discontinue those conversations.<br>On 2-15-21 the Director informed him of their Sexual Relationship Policy and provided him with education that not all tenants can give consent due to their cognitive status. He voiced understanding and his service plan was updated to reflect the behavior.<br>On 3-22-21 the Director informed him he required 15 minute checks due to ongoing inappropriate behavior with female tenants and notified he would be discharged in 30 days due to the behavior. He verbalized understanding.<br>On 4-3-21 staff observed him touching a female tenant under her blanket and escorted him out of her apartment. The Director asked him if he would be willing to vacate the premises immediately and he agreed. Staff assisted him with packing and escorted him to his vehicle.<br><br>On 3-22-21 the Program sent a certified letter of the 30 day involuntary discharge and staff signed | A 215 | | |

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| A 215 | Continued From page 3<br>for the delivered letter on 3-26-21. The Program failed to have Tenant #C1 sign he received the letter and the letter failed to include the contact information for LTCO as required.<br><br>On 10-25-21 the Director confirmed these findings. | A 215 | | |
| A 220 | 481-69.24(1)b Involuntary Transfer from Program<br><br>69.24(1) Program initiation of transfer. If a program initiates the involuntary transfer of a tenant and the action is not the result of a monitoring, including a complaint investigation or program-reported incident investigation, by the department and if the tenant or tenant's legal representative contests the transfer, the following procedures shall apply:<br><br>b. The program shall immediately provide to the office of long-term care ombudsman, by certified mail, a copy of the notification and notify the tenant's treating physician, if any.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on interview and record review the Program failed to notify the office of long-term care ombudsman (LTCO), by certified mail, a copy of the notification for discharge for 1 of 1 discharged tenants reviewed as a result of Incident #96620-I (Tenant C1). Findings follow:<br><br>Record review of Tenant #C1's nursing notes revealed the following:<br>On 2-12-21 he engaged in inappropriate sexual conversation with another tenant and verbalized understanding to discontinue those | A 220 | | |

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| A 220 | Continued From page 4<br>conversations.<br>On 2-15-21 the Director informed him of their Sexual Relationship Policy and provided with education that not all tenants can give consent due to their cognitive status. He voiced understanding and his service plan was updated to reflect the behavior.<br>On 3-22-21 the Director informed him he required 15 minute checks due to ongoing inappropriate behavior with female tenants and notified he would be discharged in 30 days due to the behavior. He verbalized understanding.<br>On 4-3-21 staff observed him touching a female tenant under her blanket and escorted him out of her apartment. The Director asked him if he would be willing to vacate the premises immediately and he agreed. Staff assisted him with packing and escorted him to his vehicle.<br><br>On 3-22-21 the Program sent a certified letter of the 30 day involuntary discharge and was signed for by staff on 3-26-21.<br><br>No certified letter notifying the LTCO or Tenant #C1's physician of the involuntary discharge could be located.<br><br>On 10-25-21 the LTCO confirmed the Program failed to send a certified letter of the involuntary discharge.<br><br>On 10-21-21 the Director stated she thought she contacted the LTCO by phone but was not sure. | A 220 | | |

# Plan of Correction
# Marshalltown Bickford Cottage

OK 2/17/22

**A415 481-67.19(3)c Record Checks**

**Regulatory Insufficiency: If a person considered for employment has been convicted of a crime. If a person considered for employment in a program has been convicted of a crime under a law of any state, the department of public safety shall notify the program that upon the request of the program the department of human services will perform an evaluation to determine whether the crime warrants prohibition of the person's employment in the program.**

**Plan of Correction:**

**The insufficiency will be corrected as follows:**

- Any persons considered for employment revealing a criminal history will have an evaluation from DHS on file beginning 10/25/21.

**The following measures will be taken to ensure the problem does not recur:**

- The Director will ensure proper documentation from DHS has been received on any persons considered for employment revealing a criminal history beginning 10/25/21.

**The program will monitor performance to ensure compliance as follows:**

- Review of the single contact license and background check site will take place to ensure a full review has been completed and any criminal history has been submitted for approval to work by DHS beginning 10/25/21.

**Date deficiencies corrected by:** 02/15/2022.

**A215 481-69.24(1)a Involuntary Transfer from Program.**

**Regulatory Insufficiency: The Program failed to include the contact information of the office of the long-term care ombudsman (LTCO) in the discharge letter for 1 of 1 discharged tenant reviewed as a result of Incident #96620-I.**

**Plan of Correction:**

**The insufficiency will be corrected as follows:**

- Any future involuntary discharge will include the required information for the LTCO beginning 10/25/21.

**The following measures will be taken to ensure the problem does not recur:**

- The Director will contact the office of the LTCO immediately prior to any involuntary discharge and ensure the proper documentation is included beginning 10/25/21.

**The program will monitor performance to ensure compliance as follows:**

- The Director will ensure proper documentation is verified by the office of the LTCO beginning 10/255/21.

**Date deficiencies corrected by:** 2/15/2022.