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 10/04/2023

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 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. Number of tenants without cognitive disorder: 18 Number of tenants with cognitive disorder: 11 TOTAL census of Assisted Living Program for People with Dementia: 29 No regulatory insufficiencies were cited during the investigation of Incident #114919-I. The following regulatory insufficiencies were cited during the recertification visit conducted to determine compliance with certification of an Assisted Living Program for people with Dementia and during the investigation of Incident #114127-I:	A 000	See Attached POC 2/12/24	
A 395	481-69.26(4)a Service Plans 69.26(4) The service plan shall be individualized and shall indicate, at a minimum: a. The tenant's identified needs and preferences for assistance This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program failed to develop an individualized service plan to include a tenant's identified needs and preferences for assistance. This pertained to 1 of 1 tenants reviewed as a result of Incident #114127-I (Tenant #1). Finding follows:	A 395		

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

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A 395	Continued From page 1 Record review of Tenant #1's file on 10/2/23 revealed the following: Legal documents included a letter from Tenant #1's physician signed 7/3/23 that declared him unable to make medical, legal, and financial decisions on his own behalf due to rapidly progressive dementia. The courts granted temporary guardianship to two family members on 7/7/23. A Mini-Mental State Examination completed 7/6/23 revealed he scored 29 out of 30. The Service Plan created 7/7/23 revealed due to confusion and new environment, GEO fencing was added to his watch. His legal representative signed the service plan on his behalf. Unusual Occurrence Report dated 7/9/23 documented Tenant #1 eloped around 6:49 a.m. and an off duty staff found him approximately 3 blocks from the Program. No injuries were noted. Review of Progress Notes revealed the following: - On 7/14/23 documented staff received an alert Tenant #1 left his apartment and went to check on him. They observed him attempting to exit through the front door and he stated he was checking out. Staff noticed the Tempo watch was not on his wrist and found it in his apartment. Tenant #1 said he used his apartment key to remove the watch and staff put it back on his wrist. -On 7/15/23 the nurse discussed with family about possible virtual appointments with Hope Harbor. -On 7/30/23 noted staff asked him where his	A 395		

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A 395	Continued From page 2 Tempo watch was and he took it out of his pocket and staff put it back on him. Staff explained he needed to wear it for his safety and he said he would keep it on. Continued record review revealed on 7/10/23 Tenant #1's Service Plan was updated and failed to address recent elopement. No updated service plan identifying his ability to remove the Tempo watch and history of packing his items to move out, and impaired decision making exhibited by his past behaviors could be located. When interviewed on 10/4/23 at 11:18 a.m. Tenant #1 stated he lived in a place for older folks and others needing extra help. When asked why he needed to move in here he paused a few minutes then said he was driving around and forgot where he was going and did not know where he was. He said he keeps his personal items packed because he was not going to stay here very much longer as the plan was for him to go home at some point. On 10/3/23 he approached this surveyor and asked if there were any boxes for him to pack up some things. When Interviewed on 10/3/23 at 9:30 a.m. the Director confirmed these findings	A 395		
A 705	481-69.35(1)a Structural Requirements 69.35(1) General requirements. a. The structure of the program shall be designed and operated to meet the needs of the tenants. This REQUIREMENT is not met as evidenced	A 705		

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A 705	Continued From page 3 by: Based on interview and record review the Program failed to operate to meet the needs of the tenants for 1 of 1 tenants reviewed as a result of Incident #114127-I (Tenant #1). Findings follow: Record review on 10/2/23 revealed an Unusual Occurrence Report dated 7/9/23 documented Tenant #1 eloped from the Program around 6:49 a.m. and an off duty staff found him approximately three blocks from the Program. No injuries were noted. Continued review of Tenant #1's file on 10/2/23 revealed the following: Legal documents included a letter from Tenant #1's physician signed 7/3/23 that declared him unable to make medical, legal, and financial decisions on his own behalf due to rapidly progressive dementia. The courts granted temporary guardianship to two family members on 7/7/23. A Mini-Mental State Examination completed 7/6/23 revealed he scored 29 out of 30. The Service Plan created 7/7/23 revealed due to confusion and new environment, GEO fencing was added to his watch. His legal representative signed the service plan on his behalf. Review of Progress Notes revealed the following: - On 7/14/23 documented staff received an alert Tenant #1 left his apartment and went to check on him. They observed him attempting to exit through the front door and he stated he was checking out. Staff noticed the Tempo watch was not on his wrist and found it in his apartment.	A 705		

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A 705	Continued From page 4	A 705		

Tenant #1 said he used his apartment key to remove the watch and staff put it back on his wrist.

- On 7/15/23 the nurse discussed with family about possible virtual appointments with Hope Harbor.

- On 7/30/23 it was noted staff asked him where his Tempo watch was and he took it out of his pocket and staff put it back on him. Staff explained he needed to wear it for his safety and he said he would keep it on.

According to the State Climatologist the weather in Marshalltown on 7/9/23 around 6:30 a.m. was 54 degrees farenheit (F) with relative humidity of 90%. The winds were out of the west northwest at 5 mph with no precipitation detected.

Observation revealed the Program situated in a residental area on Highway 14, which ran through town and had a speed limit of 45 miles per hour in front of the Program.

When interviewed on 10/3/23 at 10:32 a.m. Staff A stated the front exit door alarm would be hard to hear if in a tenant's apartment.

When interviewed on 10/3/23 at 10:43 a.m. Staff B stated the front exit door alarm would be hard to hear if in a tenant's apartment.

When Interviewed on 10/3/23 at 9:30 a.m. the Divisional Director of Health and Wellness explained the front exit door had a delayed egress and when pushed, emitted an audible alarm unless a code was entered. Any time the inner door that leads to the front exit door was opened, it would send an alert to the computer

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A 705	Continued From page 5 and out the speakers in the nurses station. She explained that all tenants were provided a Tempo watch for emergency use and added GEO fencing for tenants with a risk of elopement. When a tenant used a Tempo watch with the GEO fencing feature and opened the inner door, the alert also went to phones the staff were required to carry. She confirmed the exit door alarm may be difficult to hear when staff assisted other tenants in their apartments located away from the front area. When interviewed on 10/4/23 at 11:18 a.m. Tenant #1 stated he lived in a place for older folks and others needing extra help. When asked why he needed to move in here he paused a few minutes then said he was driving around and forgot where he was going and did not know where he was. He said he keeps his personal items packed because he was not going to stay here very much longer as the plan was for him to go home at some point. On 10/3/23 he approached this surveyor and asked if there were any boxes for him to pack up some things. When interviewed on 10/4/23 at 1:43 p.m. the Director confirmed she contacted the company to have alerts sent to the staff phones when the exterior front door was opened without the proper code entered.	A 705		

February 12, 2024

Plan of Correction-Bickford Cottage of Marshalltown

101 Newcastle Road

Marshalltown, Iowa 50158

Following Recertification Visit and Investigation of Incidents #114127-I and #114919-I

ID Prefix Tag A 395

Summary Statement of Deficiencies – 481-69.26 (4)a Service Plans

69.26 (4) The service plan shall be individualized and shall indicate, at a minimum:

a. The tenant's identified needs and preferences for assistance.

Plan of Correction: On 10/4/2023 Tenant#1's Service Plan was audited and updated to reflect resident and family's individualized needs and preferences. Such Service Plan was again updated on 10/9/2023 and 10/11/2023 to reflect changing resident and family individualized needs and preferences.

Such plan of correction—the continual review and communication of updated Resident Service Plans, to include each resident's individualized needs and preferences--has been adapted into an ongoing course of action that is reviewed every 30, 90 and 180 days, as well as when indicated by change of condition, for all residents.

ID Prefix Tag A 705

Summary Statement of Deficiencies – 481-69.35 (1)a Structural Requirements

69.35 (1) General requirements.

a. The structure of the program shall be designed and operated to meet the needs of the tenants.

Plan of Correction: On 10/4/2023 an Immediate Plan of Correction was submitted and accepted by DIA representative, Mary Hildreth, for Tenant#1.

Bickford Cottage of
Marshalltown