

DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: S0170	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 06/04/2024
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

ADDINGTON PLACE OF FAIRFIELD

**3000 WEST MADISON AVENUE
FAIRFIELD, IA 52556**

(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 visit. Number of tenants without cognitive impairment: 33 Number of tenants with cognitive impairment: 8 Total census: 41 No regulatory insufficiencies were cited regarding to the the investigations of Complaint #119542-C and Complaint #119768-C. However, an unrelated regulatory insufficiency was cited during the course of the investigations.	A 000		
A 635	481-69.32(2) Life Safety - Emergency Policies / Structure 69.32(2) An operating alarm system shall be connected to each exit door in a dementia-specific program. This REQUIREMENT is not met as evidenced by: Based on observation and interview, the program failed to ensure functioning alarm systems on all exit doors, potentially affecting 41 of 41 tenants. Finding follows: On 6/03/24 at 9:00 a.m. observations revealed three exit doors in the building did not have functional alarms. The exit doors had red lights above the door to indicate whether the alarm system and 15 second delayed egress was working. The exit door at the end of Hall 220, off of the exercise room, did not have a red light. The door opened easily, with no alarm sounding.	A 635	The program had promptly introduced "screamers" as a temporary measure in place of the DynaLocks or door security, ensuring the safety of residents. Additionally, a new checklist had been implemented for staff to verify the security of each locked exit door during every shift until the DynaLocks were repaired. The permanent DynaLocks were repaired by the contractor on July 8, 2024. The regulatory insufficiency was addressed and resolved on July 8, 2024.	7/8/2024

DIVISION OF HEALTH FACILITIES - STATE OF IOWA

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

TITLE

(X6) DATE

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A 635	Continued From page 1 Beyond the door was an open area and corn field. The exit door at the end of Hall 300, off the game room, did not have a red light. The door opened easily, with no alarm. The door led to an open area outside. The exit door off the main area living room was slightly ajar, with no red light. The door opened with no alarm and led to the outdoors. The exit doors were in the area of the building the staff referred to as assisted living or AL. On 6/03/24 at 11:10 a.m. the Area Director (AD) confirmed the program was licensed as an Assisted Living Program for People with Dementia (ALPD), even though staff referred to one area of the building as the Assisted Living area and the area of the building as the Memory Care unit. The AD said the management corporation recently discussed whether to apply for two licenses, but decided to continue with the ALPD license only and keep all of the exit doors alarmed, per ALPD regulations. The monitor showed the AD the exit door off the main living room, which was still slightly ajar, without an operating alarm system. The AD firmly shut the door, but the alarm system did not engage. The monitor told the AD of the other two exit doors observed without alarms. On 6/04/24 at 8:50 a.m. observation revealed the red light was off at the exit door off the main living room. The door opened, with no alarm. The Business Office Manager said lightening "fried" the relay system in March and the door alarm system hadn't worked on that door since then. The program had not implemented an alternative alarm system. On 6/04/24 at 1:00 p.m. the exit door at the end of Hall 200 opened easily with no alarm sounding.	A 635		

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A 635	Continued From page 2 The door at the end of Hall 300 had the red light on, which indicated the door alarm was working. On 6/04/24 at 1:05 p.m. the Business Office Manager indicated the exit door at the end of Hall 200 was also disabled by the lightening in March and not yet repaired. She stated the program fixed the alarm system on exit door at the end of Hall 300 on 6/03/24.	A 635		