DEPARTMENT OF INSPECTIONS AND APPEALS ok

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	S0045	A. BUILDING: _____ B. WING _____	C 04/06/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HOMESTEAD ASSISTED LIVING	2501 W STATE STREET MASON CITY, IA 50401

(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. General Population Program Number of tenants without cognitive disorder: 28 Number of tenants with cognitive disorder: 3 TOTAL census of Assisted Living Program for People with Dementia: 31 The following regulatory insufficiencies were cited during the recertification visit conducted to determine compliance with certification of an Assisted Living Program and the investigation of Complaints #109159-C and #109198-C.	A 000	POC 7/9/23	
A 150	481-67.2(3) Program Policies and Procedures 67.2(3) The program shall follow the policies and procedures established by the program. This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program failed to it's policy and procedure for medication administration and documention. This pertained to 1 of 4 tenants reviewed (Tenant #1). Findings follow: Record review on 4/5/23 of Tenant #1 Medication Administration Records (MAR) revealed the following: During the month of October staff failed to document medications as administered 34 times.	A 150	Plan of Correction for Program Policies and Procedures: Tag A 150 are: The Homestead of Mason City RN delegates medication administration to medication managers. Medication managers were retrained on the correct medication administration process which includes documenting on the EMAR after Medications are administered. Homestead of Mason City nurses will complete periodic audits of the MARS to ensure that the correct procedures are being followed on going and forward due date 30 days after notification is July 9, 2023.	

DIVISION OF HEALTH FACILITIES - STATE OF IOWA

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
Susan Wiley - ED	Executive Director 6/20/23	

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A 150	Continued From page 1 During the month of November staff failed to document medications as administered 6 times. During the month of December staff failed to document medications as administered 12 times. Record review of the Program's Nursing Delegation Procedure for Medication Administration included staff were to document in the EMAR (Electronic Medication Administration Record) after medications were taken. On 4/5/23 at 5:13 p.m. the Registered Nurse stated she reviewed the MAR weekly and verbally reviewed the missing documentation with the 2 staff responsible. Tenant #1's medications came in punch cards and when reviewed all medications were gone. She said no formal disciplinary actions were completed but they reviewed the procedure for this on their monthly meetings. She reported the 2 staff are no longer employed by the Program.	A 150		
A 545	481-69.30(1) Dementia Specific Education for Personnel 69.30(1) All personnel employed by or contracting with a dementia-specific program shall receive a minimum of eight hours of dementia-specific education and training within 30 days of either employment or the beginning date of the contract, as applicable. This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program failed to provide 8 hours of dementia	A 545	All staff employed by Homestead of Mason City as in Tag A 545: 69:30 (1) will have 8 hours of dementia specific training to be completed within the first 30 days of employment. Training certificates will be kept in employee files and the Homestead of Mason city Executive Director will do periodic audits to ensure compliance with competition on going and forward due date 30 days after notification is July 9, 2023.	

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A 545	Continued From page 2 specific training within 30 days of employment. This pertained to 6 of 6 staff reviewed (Staff A, Staff B, Staff C, Staff D, Staff E, and Staff F). Findings follow: Record review of staff files on 4/4/23 revealed the following: 1. Staff A was hired 1/11/22 and no dementia training in the first 30 days of employment could be located. 2. Staff B was hired 4/1/22 and no dementia training in the first 30 days of employment could be located 3. Staff C was hired 2/3/22 and no dementia training in the first 30 days of employment could be located 4. Staff D was hired 2/12/22 and no dementia training in the first 30 days of employment could be located 5. Staff E was hired 12/7/22 and no dementia training in the first 30 days of employment could be located 6. Staff F was hired 10/12/22 and no dementia training in the first 30 days of employment could be located The Director confirmed these findings on 4/4/23 at 12:39 p.m.	A 545		
A 555	481-69.30(3)a Dementia Specific Education for Personnel 69.30(3) Dementia-specific continuing education	A 555		

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A 555	Continued From page 3 a Except as otherwise provided in this subrule, all personnel employed by or contracting with a dementia-specific program shall receive a minimum of two hours of dementia-specific continuing education annually. This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program failed to provide 8 hours of dementia training annually . This pertained to 3 of 3 staff reviewed. (Staff A, Staff C, and Staff D). Findings follow: Record review of staff files on 4/4/23 revealed the following: 1. Staff A was hired 1/11/22 and completed 2 of the required 8 hours of annual dementia training. 2. Staff C was hired 2/3/22 and completed 3.75 of the required 8 hours of annual dementia training. 3. Staff D was hired 2/12/22 and completed 2 of the required 8 hours of annual dementia training. The Director confirmed these findings on 4/4/23 at 12:39 p.m.	A 555	A 555 Dementia Specific Program at Homestead of Mason City will have employee education training annually for 8 hours. Training certificates will be kept in employee files and the Homestead of Mason City Executive Director will do periodic audits to ensure compliance with completion on going and forward due date 30 days after notification is July 9, 2023.	