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
	s0196	A. BUILDING: _____ B. WING _____	03/06/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HIGHLAND RIDGE	100 VILLAGE VIEW CIRCLE WILLIAMSBURG, IA 52361

(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 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 impairment: 37 Number of tenants with cognitive impairment: 3 Total census: 40 The following regulatory insufficiency was cited related to the recertification visit to determine compliance with certification rules for an Assisted Living Program:	A 000		
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 service plans that reflected the identified needs of the tenants. This pertained to 2 of 4 tenants reviewed (Tenant #1 and Tenant #3). Findings follow: 1. Review of Tenant #1's file on 3/6/25 revealed Resident Notes indicating the following: - On 12/17/24 returned from an appointment for burning in her esophagus and provided the following new orders: diagnosis of peptic ulcer	A 395		

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A 395	Continued From page 1	A 395		

and to start sucralfate four times daily for 30 days and Zofran 4 milligram (mg), three times daily as needed, for nausea.
- On 12/31/24 tenant provided paperwork from a clinic visit on 12/30/24 which indicated the tenant had reported problems with food getting stuck at meals but denied choking. She was referred to general surgery for an esophagogastroduodenoscopy (EGD) and colonoscopy and a speech therapy referral.
- On 1/14/25 Tenant #1 provided notes from the procedure (EGD and colonoscopy). She had harsh lung sounds and wheezing was noted post procedure. She was given an incentive spirometer to use hourly while she was awake (10 breaths each time) and was to use her albuterol inhaler for wheezing or shortness of breath. She needed to follow up with her provider in two days if she was not improving.
- On 1/14/25 returned to the hospital due to fever and chills. She was admitted for intravenous antibiotics for aspiration pneumonia.
- On 1/16/25 returned to the building after an observation stay at the hospital from 1/14/25 to 1/16/25 for aspiration pneumonia.

Tenant #1's service plan dated 1/27/25 reflected she had reflux and recently had an EGD. Tenant #1's service plan did not identify Tenant #1 had difficulty at meals with food getting stuck as noted above.

2. Review of the Adult Services Monitoring Entrance Form on 3/6/25 indicated Tenant #3 was identified as a tenant that consistently refused cares.

When interviewed on 3/6/25 at the time of the entrance meeting the Clinical Administrator indicated Tenant #3 refused her whirlpools and

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A 395	Continued From page 2 she was scheduled for bathing twice per week. Continued record review revealed a Declined Services document (from 2/1/25 to 3/6/25) indicating Tenant #3 had bathing refusals on 2/3/25, 2/6/25, 2/10/25, 2/17/25, 2/20/25, 2/27/25 and 3/3/25. A MD Orders document sent to the primary care provider (PCP) indicated she was scheduled for two whirlpools per week but frequently refused. The document was signed by the PCP on 2/25/25. Tenant #3's service plan dated 2/25/25 indicated she was scheduled for whirlpools twice per week. The service plan did not reflect her routine refusals of bathing. 3. When interviewed on 3/6/25 at 3:29 p.m. and 4:08 p.m. the Clinical Administrator said Tenant #1's service plan reflected she had an EGD and had reflex. She confirmed swallowing difficulties were not reflected on the service plan for Tenant #1. She said Tenant #3's orders to the PCP identified her bathing refusals. She confirmed Tenant #3's bathing refusals were not reflected on the service plan for Tenant #3.	A 395		