

DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: S0348	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/02/2021
NAME OF PROVIDER OR SUPPLIER EAGLE POINTE PLACE		STREET ADDRESS, CITY, STATE, ZIP CODE 2700 MATTHEW JOHN DRIVE DUBUQUE, IA 52002		
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A 000	<p>Initial Comments</p> <p>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.</p> <p>Number of tenants without cognitive disorder: 53</p> <p>Number of tenants with cognitive disorder: 4</p> <p>TOTAL census of Assisted Living Program: 57</p> <p>The following regulatory insufficiencies were cited during the recertification conducted to determine compliance with certification for an Assisted Living Program.</p> <p>In addition to this recertification, an onsite infection control survey was conducted. No regulatory insufficiencies were cited during this survey.</p>	A 000	<p>POC OK 1/7/22</p>	
A 520	<p>481-69.29(2) Staffing</p> <p>69.29(2) In lieu of providing access to a personal emergency response system, a program serving one or more tenants with cognitive disorder or dementia shall follow a system, program, or written staff procedures that address how the program will respond to the emergency needs of the tenant(s).</p> <p>This REQUIREMENT is not met as evidenced by: Based on interview and record review, the Program failed to follow a system, program, or written staff procedure to address the Program's response to the emergency needs of tenants. Findings include:</p>	A 520	<p>On 1.2.21, Executive Director (ED) and/or designee evaluated current residents and determined no unmet needs were noted.</p> <p>On 12/14/21, Regional Director of Care Services (RD/CS) re-educated Care Service Manager (CSM) on procedure to address response to the emergency needs of residents, including use of community's pendant system and staff response.</p>	

DIVISION OF HEALTH FACILITIES - STATE OF IOWA
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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A 520	<p>Continued From page 1</p> <p>On 7/27/21 during a review of the Program completed Entrance Form, it was noted the Program had four tenants residing in apartments with a Global Deterioration Scale (GDS) score of four (4) or above.</p> <p>On 7/28/21 during a review of pendant calls and responses for an incident that occurred between 12/31/20 and 1/1/21, pendant call responses by staff ranged from 1 second up to 8 hours, 18 minutes and 4 seconds long.</p> <p>When interviewed on 7/29/21 at 9:57 am, Staff A stated staff could tell when there was a problem with a pendant such as a low battery because it would show on the staff pager they carried. Staff A indicated the pendant system computer could be checked at any time to follow up on pendant calls. Staff A indicated she checked the computer 3 or 4 times per shift. Staff A added, the tenants' pendants will continue to notify staff until staff respond personally to the pendant system the tenant wears.</p> <p>When interviewed on 7/29/21 at 9:25 am, Staff D stated pendant calls were supposed to be answered within 10 minutes. Staff D stated the pendant system computer was supposed to be checked every hour by staff to ensure all calls were obtained or responded to.</p> <p>On 7/29/21 at 10:41 am, the Interim Director stated the Program did not have a policy or written procedure for staff response to pendant calls/emergency needs of tenants.</p>	A 520	<p>By 12/15/21, CSM and/or designee will review pendant system with current residents. Residents identified as unable to use pendant system for calls/emergency needs will have safety checks added to the service plan for staff to implement. The frequency of the safety checks will be individualized based on residents anticipated needs.</p> <p>By 12/15/21, CSM re-educated current staff on procedure to address response to the emergency needs of residents, including use of community's pendant system and identification of residents with additional safety checks.</p> <p>Effective 12/15/21, staff will be educated on emergency response procedures at time of hire and annually.</p> <p>By 12/15/21, the Executive Director (ED) and/or designee will relocate emergency call system monitor to highly visible location.</p> <p>ED and/or designee will monitor emergency pendant response weekly for four weeks, biweekly for four weeks, then monthly for one month to ensure timely response to resident needs. CSM and/or designee will interview 5 residents weekly for four weeks, biweekly for four weeks, then monthly for one month to ensure needs are met timely. Results of the audit will be discussed during monthly QI meetings. The QI Committee will determine if continued auditing is necessary based on three consecutive months of compliance.</p> <p>Completion date: 01/07/2022</p>	
A 710	481-69.35(1)b Structural Requirements	A 710		

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A 710	<p>Continued From page 2</p> <p>69.35(1) General requirements.</p> <p>b. The buildings and grounds shall be well-maintained, clean, safe and sanitary.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observations, interviews, and record review, the Program failed to ensure all buildings and grounds were kept well-maintained, clean, safe and sanitary. Findings include:</p> <p>Observation on 7/27/21 at 11:20 am during medication administration, Tenant # 2's apartment floor was observed to have a large splattered stain on her carpeting in front of her refrigerator and a large circular stain in front of her door.</p> <p>Further observation on 7/29/21 at 1:20 pm revealed Tenant # 2's apartment flooring still stained. Tenant # 2 stated staff pulled out prune juice bottles from her refrigerator at some point and the lids were not secured and the juice spilled all over her flooring. Tenant # 2 could not recall how long ago it happened. Tenant # 2 indicated the large stain in front of her door occurred when tenants were staying in their apartments due to COVID either in 2020 or the earlier part of 2021. Tenant #2 indicated no one had ever come to clean the flooring. Tenant #2 stated it had been over a month since her linoleum had been mopped or her bathroom cleaned by housekeeping. Tenant #2 stated someone used to come empty the apartment garbage, but had not done so for a long time, so she had started doing it herself.</p> <p>When interviewed on 7/29/21 at 1:48 pm, Tenant</p>	A 710	<p>On 08/24/2021, housekeeper provided housekeeping services to Tenant #2's apartment including cleaning flooring and bathroom.</p> <p>On 09/02/2021, housekeeper provided housekeeping services to Tenant #5's apartment including cleaning flooring and bathroom.</p> <p>On 09/14/2021, housekeeper cleaned the 1st and 2nd floor garbage disposal and surrounding area.</p> <p>On 08/27/2021, housekeeper provided housekeeping services to Tenant #7's apartment including cleaning flooring and bathroom.</p> <p>On 12/14/2021, Executive Director and Maintenance Technician conducted observational audit of building and grounds, including current resident apartments to ensure areas well-maintained, clean, safe and sanitary. Identified concerns will be addressed by 01/31/2021.</p> <p>On 12/14/2021, Executive Director provided re-education to current staff on ensuring the building and grounds are well-maintained, clean, safe and sanitary. Re-education included program's procedures and checklists for housekeeping/ general cleaning. Effective 01/01/2022, education on cleaning expectations for housekeeping and related staff will be completed upon hire and annually.</p>	

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A 710	<p>Continued From page 3</p> <p>#5 stated housekeeping had not been to her apartment to clean her bathroom or clean floors in 3 years.</p> <p>Observation on 7/29/21 at 1:55 pm revealed the 2nd floor garbage disposal closet dirty with spills on the walls and floor. Garbage sat outside of the garbage cans within the closet. On 7/29/21 at 2:06 pm, the 1st floor garbage disposal closet was observed to be dirty with stains on the wall and flooring.</p> <p>During a tenant meeting on 7/27/21 at 2:00 pm, Tenants indicated they would not recommend the Program to friends or family until the cleaning of the building improved. Tenants indicated they understood the Program had been short on housekeepers or could not keep housekeepers to stay. Tenants stated they should not be charged for housekeeping services if they had not received them. Tenants present indicated floors were not cleaned on a weekly basis, bathrooms were not cleaned on a weekly basis, the garbage closets on each floor (where tenant trash was taken) were very dirty and unkept, and tenant garbage was not taken out of apartments daily.</p> <p>When interviewed on 7/27/21 at 2:15 pm, Tenant # 7 indicated it had been a long time since someone came in and completed a full cleaning (floors and bathroom) of his apartment. Tenant #7 indicated he would not recommend the Program to others until the cleaning improved.</p> <p>When interviewed on 7/29/21 at 9:25 am, Staff D stated Resident Care Partners empty garbage, assisted tenants to get up in the morning, assisted with showers, answered pendant calls, did laundry, and assisted in the dining room for a total of three hours between breakfast and lunch.</p>	A 710	<p>The Executive Director (ED) and/or designee will complete audits of 5 tenant apartments weekly for four weeks, biweekly for four weeks, then monthly for one month to ensure they are well-maintained, clean, safe and sanitary. Specific resident/staff concerns related to cleaning and housekeeping will be monitored weekly by ED and/or designee. Results of the audit will be discussed during monthly QI meetings. The QI Committee will determine if continued auditing is necessary based on three consecutive months of compliance.</p> <p>Completion date: 01/07/2022</p>	

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A 710	<p>Continued From page 4</p> <p>Staff D stated Resident Care Staff did not have time to clean apartments. Staff D stated if there was something major to be cleaned up, she would do it, but could not do the housekeeper duties also.</p> <p>When interviewed on 7/29/21 at 9:57 am, Staff A confirmed housekeeping duties were not completed regularly. Staff A stated Resident Care Partners could clean tenant apartments if they were not required to be in the dining room. Staff A stated if she saw a room needed attention badly, she cleaned as much as she could.</p> <p>When interviewed on 7/29/21 at 11:59 am, Staff E stated the Program had not been able to keep housekeeping staff employed regularly and was not sure why. Staff E stated many tenants complained to him about their apartments not being cleaned as they should. Staff E added, if an apartment was extremely dirty, he would be asked to attend to it, but apartments were not addressed regularly by housekeeping. Staff E stated there had been open housekeeping positions off and on as several housekeepers had begun employment but quit or didn't work out. Staff E stated the Program did not have the manpower to clean all of the occupied apartments.</p> <p>Record review on 7/29/21 revealed Tenant # 5 and Tenant # 2's signed occupancy agreements. The occupancy agreement, Appendix D revealed the following: Housekeeping: "The resident's Basic Service Fee includes weekly housekeeping services by Residence staff. This housekeeping service includes mopping the kitchen and bathroom floors; vacuuming; and cleaning the bathroom sink, stool, and bathtub or shower."</p>	A 710		

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A 710	Continued From page 5 On 7/29/21 at 2:30 pm, the Interim Director/Regional Executive Director and Care Services Manager confirmed the above findings.	A 710			