DEPARTMENT OF INSPECTIONS AND APPEALS

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	S0348	A. BUILDING: _____ B. WING _____	C 06/27/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EAGLE POINTE PLACE	2700 MATTHEW JOHN DRIVE DUBUQUE, IA 52002

(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: 82 Number of tenants with cognitive impairment: 3 Total census: 85 The following regulatory insufficiency was cited during the investigation of Complaint # 108982-C.	A 000	POC 6/27/23	
A 340	481-69.25(2) Tenant Documents 69.25(2) The program records relating to a tenant shall be retained for a minimum of three years after the transfer or death of the tenant. This REQUIREMENT is not met as evidenced by: Based on interview and record reviews, the Program failed to retain all records pertaining to the tenant for a minimum of three years after the transfer or death of the tenant. This pertained to 1 of 1 tenant reviewed that received activities of daily living services in 2022 (Tenant #1). Findings include: 1. On 6/27/23 a review of Tenant #1's record revealed an admission date of 12/30/21. A review of Tenant #1's most recent service plan dated 5/2/23 revealed Tenant #1 received assistance from staff members for the following cares: one person physical assist with bathing and one person physical assist with getting on and off the toilet.	A 340		

DIVISION OF HEALTH FACILITIES - STATE OF IOWA

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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A 340	Continued From page 1 2. On 6/27/23, the Care Services Manager was asked to pull Tenant #1's task sheets for November of 2022 to review as Tenant #1's record revealed a fax to Tenant #1's primary care physician dated 11/10/22 which indicated that Tenant #1 was refusing to toilet during the day and wearing 2 depends at a time. Nurse's notes dated 11/8/22 revealed Tenant #1 tested positive for COVID-19 and felt ill. 3. On 6/27/23 at 1:35 pm, the Care Services Manager stated she could not produce task sheet records from November of 2022 as the Program destroyed all resident task sheets every 90 days per corporation instruction. 4. On 6/27/23 at 3:30 pm, the Administrator and Care Services Manager confirmed not all items of the tenant record were retained for a minimum of three years after the transfer or death of a tenant.	A 340		

1. The former regional operations manager at Eagle Pointe Place informed the staff on site that Task Sheet documents should be kept for 90 days then destroyed. Going forward we will keep all tenant task sheets on file for a minimum of 3 years after transfer or death of tenant.

2. To prevent this from happening in the future, all documents will be kept in filing cabinets for 3 years. Administrator and Director of Nursing were made aware of this during the State visit. Also trained Assistant Director of Nursing on the correct procedure for all current and former tenant records.

3. To monitor performance to ensure compliance, the administrative specialist, administrator, and director of nursing will do quarterly audits.

4. The regulatory insufficiencies for the tenant files has been corrected as of 6/27/2023.