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
	S0380	A. BUILDING: _____ B. WING _____	C 01/27/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RIVER BEND RETIREMENT COMMUNITY ALP/I	813 TYLER STREET NE CASCADE, IA 52033

(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. Number of tenants without cognitive disorder: 1 Number of tenants with cognitive disorder: 14 Total Census of Assisted Living Program for People with Dementia : 15 The following regulatory insufficiency was cited during the investigation of Complaint #87610-C.	A 000		
A 089	481-69.26(4)a Service Plans 481-69.26(231C) 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 ensure identified needs were included in service plans for 4 of 5 tenant reviewed (Tenants #2, #3, #4 and #5). Findings follow: 1. Record review on 1/22/20 and 1/23/20 revealed Tenant #2 had a service plan dated 10/28/19. a. According to the service plan, staff were to	A 089	This service plan # 481-69.26 (4). 1. The program will correct the regulatory insufficiency by reviewing the daily report sheets from staff and compare at a minimum of with every nurse review, 90 day review, COC, and annually. 2. Measures taken to ensure problem does not recur daily review of staff report sheets. (over)	

DIVISION OF HEALTH FACILITIES - STATE OF IOWA

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

2/20/20

2/21/20

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A 089	Continued From page 1 take Tenant #2 into the bathroom and assist him with toileting (including changing his incontinence undergarment if soiled) in the morning, before and after meals, one time in the evening, at bed time and as needed. Staff were to help him with peri-care upon rising and as needed throughout the day and at bedtime. On 1/22/20 at 2:05 PM Staff B reported she often had to ask Tenant #2 two to three times to change out of his soiled incontinence brief before he would do so. On 1/22/20 at 2:53 PM Staff C reported Tenant #2 did not like to change out of his soiled incontinence brief. She often ripped the side of the brief open so it was clear to Tenant #2 he could not continue to wear the brief. This did not upset Tenant #2 and he would then put on a clean brief. b. Tenant #2's service plan identified he was an elopement risk but not that he wandered. A review of Report Sheets identified on 1/9/20, Tenant #2 kept going into another tenant's room. It took multiple redirections to get the tenant out of the room. On 1/20/20, a staff member walked into a tenant's room and found Tenant #2 there. The staff tried to have Tenant #2 leave but he kept shoving the staff person away so he could stay in the room. On 1/22/20, it was documented Tenant #2 kept going into other tenants' rooms. Nurse's/Care notes dated 1/16/20 identified Tenant #2 continued to wander into other apartments. c. The service plan noted Tenant #2 required set up for meals. As he had no teeth, soft foods were	A 089	3. The plan to monitor Performance to ensure compliance will be that the lead universal worker will review all ISP's @ length monthly et report inconsistencies to the nurse. 4. The date of correction will be no later than March 12, 2020. K. Holmes RN	

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A 089	Continued From page 2	A 089		

to be provided. The service plan identified a cue card would be placed at Tenant #2's table during meals which encouraged him to take one bite of food at a time, take a drink after each bite and to swallow his food. A hand-written note directed staff to mash food up with a fork. Butter, jelly, syrup, etc. could be added as needed.

A review of Nurse's/Care notes revealed the following:
- on 11/6/19 a former RN identified Tenant #2 continued to pocket food in his cheek and coughed sometimes spewing food in spite of offering a softer diet. He did not follow staff instruction or cue cards and continued to eat quickly. She contacted Tenant #2's physician to request a speech evaluation.
- on 11/7/19 the former RN documented the program received an order for a speech evaluation from Tenant #2's physician. She contacted Tenant #2's POA (power of attorney) and asked her to set up an appointment for this.
- on 11/12/19 the RN Manager noted Tenant #2 pocketed his food even with his cue cards and did not swallow what he had in his mouth.
- on 11/14/19 the RN Manager documented she sat with the tenant at breakfast. He ignored her when she pointed at the cue card and continued to put food in his mouth even when it was falling out.
- on 11/21/19 the RN Manager noted Tenant #2 was covering his cue card with his napkin even when staff pointed at his cue card and provided verbal cues to him.
- on 11/22/19 Tenant #2's POA contacted the program and informed the former RN insurance would not pay for a speech therapy evaluation. The former RN informed the POA the program may have to discharge Tenant #2 if a speech therapy evaluation was not completed.

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A 089	Continued From page 3	A 089		

- on 11/25/19 the RN Manager met with Tenant #2's POA and informed her of the risk of Tenant #2 choking and aspirating as they could not provide him with an alternate diet. The POA agreed to start looking for a higher level of care. The program agreed to continue to try to direct the resident with smaller bites, swallowing what was in his mouth and take a drink with bites.
- on 12/13/19 the RN Manager noted Tenant #2 continued to eat in a rapid fashion and pocket food even with directives.
- on 1/16/20 the RN Manager noted on 1/16/20 Tenant #2 had difficulty with chewing and swallowing food. He continued to put too much food in his mouth or take a drink between bites. Tenant #2 continued to pocket food and cough. The resident ignored the cue card even with verbal cues. He would cover up the cue card.

d. The tenant's service plan did not reflect refusals with peri-care, wandering into other tenants' rooms, swallowing concerns or pocketing food.

2. Record review on 1/22/20 and 1/23/20 revealed Tenant #3 had a service plan dated 9/27/19.

a. The service plan noted staff were to assist Tenant #3 with a shower twice a week. Tenant #3's service plan also noted she needed assistance with selecting clothing in the morning, cues and assistance to change her clothes and ensuring she put on clean clothes each morning. Tenant #3 was noted to be continent of bladder and bowel. Peri-care was not noted in the continence section of her service plan.

A Health/Functional Assessment dated 9/29/19

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A 089	Continued From page 4	A 089		

identified Tenant #3 often refused to change clothing or bathe. She was often uncooperative and refused tasks like showering, however many times if a different staff requested her to take a shower at a later time she would do so.

A review of Report Sheets noted Tenant #3 refused peri-care and undressing on 1/8/20. The staff wrote Tenant #3 screamed at staff to get out of her room. Tenant #3 refused peri-care, oral hygiene and assistance with dressing on 1/10/20. Tenant #3 refused a shower on 1/11/20. Tenant #3 refused peri-care, oral hygiene and assistance with undressing on 1/12/20. She refused cares on second shift. Tenant #3 punched at the television twenty times on third shift. On 1/15/20, Tenant #3 refused her shower and peri-care. Tenant #3 refused cares on 1/16/20. She refused cares on 1/17/20, kicked at a staff member, and put her fist up at staff. Tenant #3 refused her morning cares on 1/19/20. Tenant #3 refused assistance with peri-care and undressing in the evening on 1/22/20.

On 1/22/20 at 1:40 PM Staff A reported Tenant #3 sometimes raised her fist at staff. At times she refused tasks all day. Staff A said Tenant #3 often showered only once a week and wore clothing for a couple of days in a row.

On 1/22/20 at 2:05 PM Staff B said Tenant #3 regularly refused peri-care, showering or changing her clothing. She often only showered once a week and changed clothes 3 to 4 times a week even with multiple prompts by staff. She stated Tenant #3 sometimes swung at staff but didn't touch them.

On 1/22/20 at 2:53 PM Staff C reported Tenant #3 did not like staff touching her. She estimated

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A 089	Continued From page 5 Tenant #3 showered about once a week and did not like to change her clothing. The tenant sometimes put her fists up at staff but did not hit them. She had hit her television. On 1/22/20 at 3:15 PM Staff D reported Tenant #3 did not like to change her clothing. Staff D described Tenant #3 as someone who gestured at staff and yelled at them. b. Tenant #3's service plan did not reflect the need for peri-care, refusals with peri-care, showering or changing clothes, raising her fist or kicking at staff or hitting her television. 3. Record review on 1/22/20 and 1/23/20 revealed Tenant #4 had a service plan dated 8/19/19. a. According to the service plan, Tenant #4 was occasionally incontinent of bladder and wore incontinence briefs. Staff were to assist with peri-care in the morning and evening and after using the toilet as needed. Record review of Report Sheets revealed a form dated 1/8/20 in which it was noted Tenant #4 refused peri-care multiple times. On 1/22/20 at 2:05 PM Staff B reported Tenant #4 did not want help with peri-care in the morning. At times he refused to change his incontinence brief all day, even if soiled. On 1/22/00 at 3:15 PM Staff D reported Tenant #4 yelled about changing out of his soiled incontinence brief. He preferred to continue wearing the soiled brief rather than putting on a new one.	A 089		

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A 089	Continued From page 6 b. Tenant #3's service plan did not reflect how staff were to address the refusals with peri-care or changing of briefs when soiled. 4. Record review on 1/22/20 and 1/23/20 revealed Tenant #5 had a service plan dated 11/16/19. a. According to his service plan, Tenant #5 was to be assisted with showering two times per week. He was also to receive assistance with dressing and undressing, although it was noted he would often sleep in his pants. Tenant #5 wore incontinence briefs at night. Staff were to assist with incontinence care in the morning, evening and as needed by ensuring the peri area was dry after washing, paying special attention to the groin area. It was noted Tenant #5 was very distracted and difficult to stay on track. He was to be diverted to his room if getting anxious and allow him to talk to his sons on the telephone. If Tenant #5 refused cares, staff were to go back again or try later or with a different staff member. According to a Health/Functional Assessment dated 11/16/19, Tenant #5 had refused peri-care, oral hygiene and the bathroom at times. Tenant #5 had a UTI and punched a staff member three times. A review of incidents reports revealed on 11/29/19, staff asked Tenant #5 to take his medication. Tenant #5 took the pills from her and began yelling at the staff member. The staff member backed away and asked for the pills back from Tenant #5 since he hadn't taken them. He did not give them to her and she asked for assistance as he was very agitated. Another staff	A 089		

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A 089	Continued From page 7	A 089		

person came to help. Tenant #5 then hit the second staff person. On 12/19/19, staff went to Tenant #5's room to do his neuro checks. She went to take his temperature and he started swinging his arm at her. On 1/13/20, Tenant #5 pinched a staff person's fingers and arm and yelled at her to get out of his room.

A review of Report Sheets revealed Tenant #5 refused all cares on 1/8/20. He refused his morning cares on 1/10/20 and evening cares on 1/12/20. Tenant #5 refused cares the morning and evening on 1/13/20. He did allow staff to assist him with peri-cares overnight on 1/13/20 and it was noted he had a sore by his groin but would not let staff clean it. Tenant #5 refused oral hygiene on 1/15/20 and became agitated while doing peri-care that evening. Tenant #5 refused his evening cares on 1/17/20. Tenant #5 raised his fist to staff on 1/18/20 and refused overnight cares. Staff noted his groin area was very red the morning of 1/20/20 but staff reported he refused to allow them to help him with cares later in the day.

On 1/22/20 at 1:40 PM, Staff A stated Tenant #5 often would not put on new incontinence briefs during third shift. She reported Tenant #5 has raised his fist and hit her.

On 1/22/20 at 2:05 PM, Staff B reported Tenant #5 refused assistance with his peri-care, changing clothing and taking his medication. She said he punched, grabbed fingers and pushed. Staff B described this behavior as happening daily, although his behavior had improved over the past two weeks.

On 1/22/20 at 2:53 PM, Staff C stated Tenant #5 refused assistance with peri-care, showering and

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A 089	Continued From page 8 changing his clothing. She described Tenant #5 as being physically aggressive on a daily basis. On 1/22/20 at 3:15 PM, Staff D reported Tenant #5 often refused assistance with peri-care. b. Tenant #5's service plan did not address continual refusals with cares, med refusals or aggression towards staff. On 1/27/20 at 3:20 PM the RN Manager and Corporate Nurse confirmed the service plans did not incorporate all service needs and interventions.	A 089		