

DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: S0389	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 02/17/2025
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

KEYSTONE CEDARS AL

**6325 ROCKWELL DRIVE NE
CEDAR RAPIDS, IA 52402**

(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: 60 Number of tenants with cognitive impairment: 3 Total census: 63 The following regulatory insufficiencies were cited related to the investigation of Complaint #123849-C:	A 000		
A 285	481-67.5(2)f(4) Medications 67.5(2) Each program shall follow its own written medication policy, which shall include the following: f. When medications are administered traditionally by the program: (4) Medications and treatments shall be administered as prescribed by the tenant's physician, advanced registered nurse practitioner or physician assistant. This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program failed to administer medications and treatments as ordered. This pertained to 1 of 4 current tenants reviewed (Tenant #2) who had medications administered by staff. Findings follow: 1. Review of Tenant #2's file on 2/13/25 and	A 285		

DIVISION OF HEALTH FACILITIES - STATE OF IOWA

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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A 285	Continued From page 1 2/17/25 revealed an Incident Report dated 9/28/24 indicating a medication error had occurred at 12:56 p.m. on first shift. Staff could not find the creams (topical medications) that were listed on the medication administration record (MARs) so staff applied Calmoseptine, which was available in Tenant #2's apartment. The Director of Nursing (DON) educated staff regarding the the importance of following the MAR and to notify nursing staff if they could not find the medication listed on the MAR. The report indicated the primary care provider (PCP) was notified via fax and Tenant #2's family was also notified. Continued record review revealed Tenant #2's September 2024 MAR reflected an order dated 9/27/24 for nystatin cream for the groin, upper thigh, and abdominal fold areas, to be applied in the morning and at bedtime and as needed (PRN). There was also an order dated 9/27/24 for Desitin cream for the groin, upper thigh, buttocks and abdominal folds. The Desitin was to be applied with the nystatin in the morning and at bedtime and PRN. The MAR reflected on 9/28/24 in the morning, both creams were documented as "other." On 9/28/24 at bedtime, both creams were documented as refused. The Scheduled Medication Notations section indicated on 9/28/24 the nystatin cream and Desitin cream were both documented as not available in the morning. On 9/28/24 at bedtime the nystatin cream and Desitin cream were documented as refused by tenant. It was also documented the creams could not be found and Calmoseptine was applied. The MAR did not reflect an order for Calmoseptine; despite staff administering it on 9/28/24.	A 285			

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A 285	Continued From page 2 2. When interviewed on 2/17/25 at 2:30 p.m. the DON said Tenant #2's family member dropped off two creams and they were put in the wrong tenant apartment. The creams were never opened and were not administered to the other tenant. There were two doses not administered for Tenant #2. The PCP was notified and there was no adverse side effects noted.	A 285			
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 5 of 5 tenants reviewed (Tenants #1, #2, #3, #4 and #5). Findings follow: 1. Review of Tenant #1's file on 2/13/25 and 2/17/25 revealed the service plan reflected staff assisted with toileting. Hospice would assist when they were there and she was independent to and from the toilet many times through the day. The Task Administration Records (TARs) from September 2024 to February 2025 reflected refusals of toileting assistance. Further review revealed Tenant #1's service plan did not reflect at times she refused toileting	A 395			

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A 395	Continued From page 3 assistance. 2. Review of Tenant #2's file on 2/13/25 and 2/17/25 revealed the service plan dated 9/30/24 reflected staff assisted with toileting every three hours while awake. The September 2024 TAR reflected refusals of toileting. The 9/30/24 service plan did not reflect the refusals of toileting. Continued review revealed the 10/29/24 and 1/27/25 service plans reflected staff assisted once weekly with bathing and she had a history of refusing. The service plan also reflected to apply Calmoseptine and Zeasorb if Tenant #2 requested after the shower. The service plan reflected staff assisted with dressing and undressing. Further record review revealed the November 2024 to February 2025 TARs reflected refusals for dressing/undressing. The service plans did not reflect Tenant #2's refusals of dressing/undressing. The tenant's October 2024 medication administration records (MARs) reflected orders for miconazole/Zeasorb-AF powder, Desitin cream and Calmoseptine cream. The November MAR reflected orders for Miconazole/Zeasorb-AF powder and Calmoseptine cream. Refusals of the topical medications were indicated in both October and November 2024. The service plan did not reflect Tenant #2's refusals of the topical medications. 3. Review of Tenant #3's file on 2/17/25 revealed the service plan reflected staff assisted with putting on and removing compression hose. The service plan also reflected staff administered his medications.	A 395			

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A 395	Continued From page 4 The tenant's MARs from November 2024 to January 2025 reflected refusals of oral medication and compression hose. Tenant #3's service plan did not reflect at times he refused medications and assistance with compression hose. 4. Review of Tenant #4's file on 2/17/25 revealed Observations (nurse's notes) for Tenant #4 reflected on 2/12/25 staff had reported Tenant #4 had a sore on her buttocks (right side). The nurse noted she had an odor and redness in the groin (same area). Tenant #4 was informed she should be using her antifungal powder at least twice daily until it cleared up. She was told to let nursing staff know if she needed help applying it. The tenant's November and December 2024 TARs reflected bathing refusals. Tenant #4's service plan dated 1/16/25 indicated staff assisted with bathing; however, did not reflect at times she refused bathing. The service plan also did not reflect the reddened area noted above and that she was independent with the treatment of the area. 5. Review of Tenant #5's file on 2/17/25 revealed the service plan dated 1/24/25 indicated she required assistance with dressing and undressing and toileting. Continued revealed the November 2024 to January 2025 TARs reflected refusals for toileting, transfers (standby/cueing) as needed and dressing. The tenant's December 2024 and January 2025	A 395			

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A 395	Continued From page 5 MARs reflect an order for zinc oxide ointment to affected area(s). There were refusals noted on the December and January MARs. Continued record review revealed Tenant #5's service plan did not reflect the refusals of cares the cares as noted above. It also did not reflect the reddened area, treatment and at times refusals of the treatment for the affected area. 6. When interviewed on 2/17/25 at 2:30 p.m. the DON said Tenant #1 refused toileting at times and at times she allowed staff to assist. She said Tenant #5's refusals were due to her independence. She said Tenant #3 refused his compression hose and showers. She said Tenant #2 did not want to wake up and she refused cares in the morning.	A 395			