5/19/21

PRINTED: 02/24/2021
FORM APPROVED

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 |
|---|---|---|---|
| | S0432 | A. BUILDING: _____ B. WING _____ | 01/07/2021 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| PRAIRIE GATE MEMORY CARE | 16 VALLEY VIEW DRIVE CO BLUFFS, IA 51503 |

| (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 | (X5) COMPLETE DATE |
|---|---|---|---|---|
| A 000 | Initial Comments<br><br>Assisted Living Programs for People with Dementia are defined by the type of population served. The census numbers were provided by the Program at the time of the on-site.<br><br>Number of tenants without cognitive disorder: 0<br>Number of tenants with cognitive disorder: 3<br>Total population of Program at time of onsite: 3<br><br>No regulatory insufficiencies were cited during the onsite infection control survey completed 1-6-21.<br><br>The following regulatory insufficiency was cited during the initial certification visit conducted to determine compliance with certification of an Assisted Living Program. | A 000 | F000<br><br>This plan and response to these survey findings is written solely to maintain certification in the Medicare and Medical Assistance programs. These written responses do not constitute an admission of noncompliance with any requirement nor an agreement with any finding. We wish to preserve our right to dispute these finds in their entirety at any time and in any legal action. We may submit a separate request for Informal Dispute Resolution for certain findings and determinations. | |
| A 121 | 481-69.30(1) Dementia Specific Education for Personnel<br><br>481-69.30(231C) Dementia-specific education for program personnel.<br>69.30(1) All personnel employed by or contracting with a dementia-specific program shall receive a minimum of eight hours of dementia-specific education and training within 30 days of either employment or the beginning date of the contract, as applicable.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on interview and record review the Program failed to provide 8 hours of dementia training within 30 days of employment for 8 of 8 staff reviewed (Staff A, Staff B, Staff C, Staff D, Staff E, Staff F, Staff G, and Staff H). Findings follow: | A 121 | F641<br><br>1. Facility maintains that the policy and procedure is in place, cited deficiencies remedied.<br>2. Facility reassigned education and completed audits with HR team. Audits began March 1st, completed regularly with updates sent to team for completion of unfinished education. Staff pulled from schedule if not completed as assigned.<br>3. Dementia training (education attached) assigned to Memory Care team. Completed or staff no longer an employee.<br>4. Audits weekly x4, monthly x2. To be monitored by HR. | 3/6/21 |

DIVISION OF HEALTH FACILITIES - STATE OF IOWA

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE: Campus Administrator — (X6) DATE: 3/16/2021



DD 5/12/21

DEPARTMENT OF INSPECTIONS AND APPEALS

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| A 121 | Continued From page 1<br><br>Review of staff files revealed the following:<br><br>- Staff A, hired 5-29-2020, completed 1 hour of dementia training within 30 days.<br>- Staff B, hired 6-8-2020, completed 1 hour of dementia training within 30 days.<br>- .Staff C, hired 3-20-2020, completed 3.25 hours of dementia training within 30 days.<br>- Staff D, hired 10-2-2020, completed 1 hour of dementia training within 30 days.<br>- Staff E, hired 3-1-2020, completed 1 hour of dementia training within 30 days.<br>- Staff F, hired 10-15-2020, completed 1 hour of dementia training within 30 days.<br>- Staff G, hired 4-27-2020, completed 1 hour of dementia training within 30 days.<br>- Staff H, hired 9-3-2020, completed 1 hour of dementia training within 30 days.<br><br>On 1-6-21 at 11:33 a.m. the Administrator confirmed these findings. | A 121 | | |