

**Iowa Department of Inspections and Appeals
Health Facilities Division
Citation**

Citation Number: #5822		Date: August 8, 2022		
Facility Name: Davenport Lutheran Home		Survey Dates: July 18 – July 26, 2022		
Facility Address/City/State/Zip: 1130 West 53 rd Street Davenport, IA 52806		TAG, VW		
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date

58.28(3)e	481—58.28(135C) Safety. The licensee of a nursing facility shall be responsible for the provision and maintenance of a safe environment for residents and personnel. (III) 58.28(3) Resident safety. e. Each resident shall receive adequate supervision to protect against hazards from self, others, or elements in the environment. (I, II, III) DESCRIPTION: Based on clinical record review, observations and staff interviews, the facility failed to provide an adequate door alarm system be in place to prevent the risk of elopement for one of one residents reviewed (Resident #35). The resident walked out of the locked Memory Care Unit (MCU) while following a visitor and proceeded to walk up a hallway and exit the building through unalarmed double doors. This failure resulted in an Immediate Jeopardy to the health, safety, and security of the resident. The facility reported a census of 68 residents	CLASS I	\$6,250 (HELD IN SUSPENSION)	UPON RECEIPT
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Facility Administrator

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	Findings Include: 1. Resident #35's Minimum Data Set (MDS) Assessment completed 5/31/22 listed diagnoses that included: unspecified dementia without behavioral disturbance, lymphedema, and heart failure. The MDS listed Resident #35 required the limited assistance of one staff for walking in her room and on the unit, and extensive assistance of two to move off the unit and return from off unit locations. The MDS reflected the resident's Brief Interview for Mental Status (BIMS) score of 6 out of 15, indicating severely cognitively impaired. The Care Plan dated 3/18/22 identified the resident as at risk for wandering and elopement, and ambulates with wheeled walker independently, and used a wheelchair at times for longer distances as she tends to tire. The Wandering Risk Assessment dated 7/3/22 indicated the assessment done monthly, and the resident can follow instructions, is ambulatory, can communicate, and has no history of wandering, The assessment scored the resident at a 9, indicating at risk to wander.			
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	Review of the Nurse's Progress Notes revealed the following: a. On 3/16/22 at 6:00 PM, the resident was up front and attempted to go outside b. On 3/25/22 at 10:40 AM, the provider noted the resident refused to wear a Wanderguard, and the resident wanders throughout the facility and the divide is needed to prevent her from exiting through the wrong doors. c. On 3/25/22 at 1:36 PM, the resident took the Wanderguard from the nurse after attempted to put it on and would not give the device back. The resident was placed on fifteen minute checks. d. On 3/28/22 at 2:30 AM, the resident noted to be without a Wanderguard, and a replacement not available. e. On 4/1/22 at 2:45 AM, the resident refused to wear Wanderguard, 15 minute checks put into place f. On 4/1/22 at 4:46 PM, two Certified Nursing Assistants (CNA's) were walking up the ramp of the MCU hallway entrance and noted the resident had walked out of the back exit door and turned around to come back inside but the automatic door had closed. The CNA's immediately opened the door and assisted the resident back inside without difficulty G. On 5/28/22 at 12:55 AM, noted the resident ambulates with walker and can exit seek at times			
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	The July 2022 Treatment Administration Record (TAR) documented the resident without the Wanderguard on 27 of 42 twice daily checks. The facility reported Resident #35 eloped from the building on 7/20/22 at 4:13 PM, and the event is recorded on video. An observation on 7/20/22 at 4:45 PM of the video surveillance of the interior exit door of the MCU, and of the south exterior double sliding doors showed on 7/20/22 a visitor, staff and several residents near the exit door. As the visitor left at approximately 2:56 PM, residents and staff dispersed, and at 2:57 PM Resident #35 walked out of the MCU unit door, behind a visitor. The resident turned to the left, walked up a hallway and exited the double doors at 2:58 PM. The video revealed Staff D, Licensed Practical Nurse (LPN), and Staff E CNA left the unit at 3:04 PM (six minutes lapsed) to look for the resident, and returned with her at 3:09 PM. During the observation of the video surveillance on 7/20/22 at 4:50 PM, Staff J, LPN stated earlier in the day the Wanderguard was removed from Resident #35's ankle as edema had caused tightness and discomfort. She added a fax had been sent to the provider to request an order to discontinue the device			
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	due to the tightness, and the resident residing on a locked unit. On 7/26/22 at 11:53 AM, the State Climatologist revealed the weather conditions on 7/20/22 at 2:57 PM to 3:09 PM at the location Resident #35 left the facility are recorded as: 87 degrees Fahrenheit (F), humidity at 53%, which resulted in a heat index of 90 degrees F. The wind was from the west northwest at 17 miles per hour (MPH), with gusts up to 25 mph. The sky was partly cloudy, with no precipitation recorded. During an interview on 7/21/22 at 11:27 AM, Staff I, LPN and MCU Unit Manager stated the code required alarm on the MCU Unit is for the interior door only. Staff I stated five staff were scheduled on the unit at the time of the elopement, for a MCU census of 24 residents. During an interview on 7/21/22 at 11:34 AM, Staff F, CNA stated she was in the back of the unit (part of unit furthest away from the exit door used in the elopement) when Staff G, CNA asked her to look out the window of room #314 to confirm Resident #35 stood across the street talking to an independent living resident. Staff F stated she immediately saw			
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	Resident #35 outside and ran to tell a Nurse and left the unit to help find the resident. During an interview on 7/21/22 at 12:11 PM, Staff G, CNA stated after she clocked in for her shift she always looked to say hi to Resident #35. When she was unable to locate the resident on the Unit, she went to the resident's room (#314) and that is when she observed Resident #35 outside, across the street talking to another lady she did not know. Staff G stated she immediately asked Staff F, CNA to confirm Resident #35 stood across the street from the facility. During an interview on 7/21/22 at 12:29 PM, Staff E, CNA stated she assisted with getting Resident #35 back to the facility after the elopement. Staff E stated the resident was across the street in front of one of the independent living cottages talking to women who lived in the home. Staff E stated the resident was tired when returning to the facility, so she had her rest on the walker seat. Staff E stated that Resident #35 did not have a Wanderguard. She added the Wanderguard sounds an alarm when a resident is near the MCU Unit exit door, and the alarm gets louder when a resident exits. Staff E stated there is not a security or Wanderguard alarm on the north exit door across from the Unit or on the double door exterior exit the resident used to leave.			
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	During an interview on 7/21/22 at 12:43 PM, Staff B, LPN stated she was on the Unit when Resident #35 eloped. Staff B stated the exit door to the Unit has a security and a Wanderguard alarm. However, the north exterior exit door across from the Unit, and the south exterior exit double doors are not equipped with alarms. An observation of the north exterior door on 7/21/22 at 12:57 PM revealed the door is unlocked, and not equipped with an alarm. The door is locked from the outside. An observation on 7/21/22 at 1:00 PM of the elopement path revealed the resident turned right when exited the facility, walked through the parking lot, down an access road to the facility's Independent Living Housing, crossed the road and walked along a sidewalk. The distance measured approximately one tenth of a mile. The surfaces walked were asphalt and concrete, with multiple uneven sections throughout. An observation on the south exterior double doors on 7/21/22 at 12:59 PM revealed the doors automatically opened when an object is within four and half feet four of the exit. The doors were not equipped with an alarm, and only locked from the outside.			
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	During an interview on 7/21/22 at 2:11 PM, Staff D, LPN stated Resident #35 continually asked for the Wanderguard to be removed as it becomes tight due to edema. The Wanderguard had to be cut off in the past due to becoming too tight. Staff D denied knowing if anyone had tried to put the Wanderguard in a location that would not cause discomfort. Staff D stated Resident #35 has attempted to elope in the past as she became anxious about her children and wanted to go home to check on them. During an interview on 7/26/22 at 1:19 PM, the Director of Nursing (DON) stated her expectation is staff would monitor a resident with a Wanderguard when they are near a door, and when a visitor is leaving to prevent a potential elopement. A facility policy, dated 2/16/22, titled Elopement Prevention and Response revealed fire doors are alarmed and not locked and will activate if there is an attempt to exit. The Wanderguard bracelet device when sensed at alarmed doors will sound both at the door and the Nurse's Desk to alert staff that the resident is attempting to exit.			
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	FACILITY RESPONSE:			
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