

DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 970058	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/16/2021
NAME OF PROVIDER OR SUPPLIER CHARTER SENIOR LIVING OF NORTHPARK PI		STREET ADDRESS, CITY, STATE, ZIP CODE 2562 PIERCE STREET SIOUX CITY, IA 51104		
(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
R 000	Initial Comments There were no deficiencies cited during the onsite infection control survey. The following deficiencies were cited during the investigation of Complaint #96940-C.	R 000		
R 642	481-57.17(3)e Records 481-57.17(135C) Records. 57.17(3) Incident record. e. An incident report shall be completed for every accident, incident or unusual occurrence within the facility or on the premises that affects a resident, visitor, or employee. (II, III) This REQUIREMENT is not met as evidenced by: Based on interview and record review the facility failed to ensure an incident reports was completed for 1 of 1 incidents reviewed where an employee was trapped in the elevator (Staff G). Findings include; On 6/17/21 at 9:15 a.m. interview with the Activity Director revealed the facility's elevator stopped working on the evening of 2/19/21 with Staff G trapped inside between floors. On 6/17/21 at 11:13 a.m. interview with Staff G revealed at approximately 6:25 p.m. on 2/19/21 she was heading home for the evening. When she got on the elevator and pushed the button to go from the kitchen in the basement to the first	R 642	<ol style="list-style-type: none"> 1. An incident report will be completed for every accident, incident or unusual occurrence within the facility or on the premises that affects a resident, visit, or employee. 2. All staff will been re-trained on Incident Reporting and documentation. 3. All department directors have been in serviced on Incident Reporting and documentation. 4. A binder has been created to retain such documentation. 5. Incidents will be reviewed during the management team daily stand up meeting. 6. ED/HWD and/or designee will monitor on-going. <p style="text-align: right;"><i>✓ 6/19/21</i></p>	07-18-2021

DIVISION OF HEALTH FACILITIES - STATE OF IOWA

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

TITLE

(X6) DATE

✓ 8/13/21

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R 642	<p>Continued From page 1</p> <p>floor the elevator went approximately halfway between the two floors and stopped. The lights onboard the elevator went out and she smelled smoke. Staff G said she used her cell phone to call an aide working the floor to tell them she was stuck on the elevator. While waiting for help to arrive she used the flashlight on her cell phone to illuminate the elevator car that was dark. Staff G thought she was stuck on the elevator for approximately 10 minutes before the fire department got her out.</p> <p>On 6/17/21 at 1:05 p.m. the Interim Executive Director confirmed an incident report for this occurrence could not be located.</p>	R 642		
R 670	<p>481-57.18(5) Resident Care & Personal Services</p> <p>481-57.18(135C) Resident care and personal services.</p> <p>57.18(5) All nonambulatory residents shall be housed on the grade level floor unless the facility has a suitably sized elevator. (II)</p> <p>This REQUIREMENT is not met as evidenced by: Based on interview and record review the facility failed to ensure the elevator had a current operating permit guaranteeing safe operation in order to accommodate nonambulatory residents housed on the second floor of the facility. Findings include: On 6/16/21 at 1:33 p.m. review of the operating permit in use onboard the one elevator of the</p>	R 670	<ol style="list-style-type: none"> 1. All nonambulatory residents shall be housed on the grade level floor unless the facility has a suitably sized elevator. 2. All nonambulatory residents have been reloaded to the grade level floor. 3. HWD and/or designee will assess all resident current or future for appropriateness of residing on a second level or above who may need the use of an elevator. 4. ED/HWD and/or designee will monitor with each new resident. 	07-02-2021

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R 670	<p>Continued From page 2</p> <p>facility revealed a date of 9/30/19. This date indicated that was the last date the elevator had passed its inspection for service by the Iowa Workforce Development Division of Labor Elevator Safety. Further review revealed on 3/16/21 the elevator was to be inspected by the Iowa Workforce Development Division of Labor Elevator Safety but the elevator was noted as not working. The inspector planned to return once the elevator was fixed.</p> <p>On 6/16/21 at 3:37 p.m. interview with Staff C revealed Residents #1 and #2 both lived on the second floor of the facility, were in wheelchairs and would not be viewed as ambulatory or able to use the stairs down to the first floor.</p> <p>On 6/17/21 at 10:40 a.m. the Interim Executive Director confirmed this finding.</p> <p>On 6/17/21 at 11:55 a.m. review of Resident #1's Charter Senior Living Assessment dated 2/3/21 revealed she utilized a wheelchair for mobility.</p> <p>On 6/17/21 at 12:58 p.m. review of Resident #2's Charter Senior Living Assessment dated 2/05/21 revealed she could not walk and used a wheelchair.</p>	R 670		
R1016	<p>481-57.34(2)a Safety</p> <p>481-57.34(135C) Safety. The licensee of a residential care facility shall be responsible for the provision and maintenance of a safe environment for residents and personnel. (I, II, III)</p> <p>57.34(2) Safety duties of administrator. The administrator shall have a written emergency plan to be followed in the event of fire, tornado,</p>	R1016	<p>1. A written emergency plan will be posted and followed</p> <p>2. Plan has been posted.</p> <p>3. Emergency Preparedness Binder has been created and available at the front desk, ED office, nurses station and with ESD</p> <p>3. ED/ESD and/or designee will monitor monthly</p>	06-17-2021

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R1016	<p>Continued From page 3</p> <p>explosion, or other emergency. (III)</p> <p>a. The plan shall be prominently posted in a common area of the building. (III)</p> <p> This REQUIREMENT is not met as evidenced by: Based on interview the facility failed to have the written emergency plan prominently posted in the common areas of the building. Findings include: On 6/17/21 at 10:40 a.m. the Interim Executive Director reported a copy of the emergency plan was not posted on the second or first floor of the building. On 6/17/21 at 11:36 a.m. the Interim Executive Director was able to locate the plan in a binder located at the front desk of the facility and provided a copy of the evacuation plan.</p>	R1016		
R1058	<p>481-57.36(2) Maintenance</p> <p>481-57.36(135C) Maintenance.</p> <p>57.36(2) The building, grounds, and other buildings shall be maintained in a clean, orderly condition and in good repair. (II, III)</p> <p> This REQUIREMENT is not met as evidenced by: Based on observation, interview and record review the facility failed to ensure the elevator kept in good repair. Findings include: On 6/16/21 at 1:07 p.m. interview with the</p>	R1058	<p>1. The facility will maintain the building, grounds, and other buildings in a clean, orderly condition and in good repair.</p> <p>2. Elevator was taken out of use immediately pending the outcome of inspection from TK Elevator.</p> <p>3. Quote provided 07-09-2021 to provide a timeline to update/ modernize the elevator (8042).</p> <p>4. ED/ESD will monitor ongoing for appropriate updates and modernization of elevator.</p>	10-31-2021

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R1058	<p>Continued From page 4</p> <p>Maintenance Director revealed the facility had problems since February 2021 with the building's elevator used to service the kitchen located in the basement and the first and second floors of the Residential Care Facility. He reported the facility was waiting on parts to fully repair the elevator. Some of those parts were now obsolete and no longer available. No documentation of when or how often the elevator was unavailable for use could be located.</p> <p>Although the elevator was observed to be operating during the investigation, the floor indicator and the fire bell onboard the elevator were not working. The Maintenance Director reported without those items functioning properly the Iowa Workforce Development Division of Labor Elevator Safety would probably not issue an operating permit.</p> <p>On 6/16/21 at 2:39 p.m. the Interim Executive Director confirmed these findings and stated he was working to remedy the concern.</p>	R1058		