

**Iowa Department of Inspections and Appeals
Health Facilities Division
Adult Services Civil Penalty Citation**

Date: February 9, 2022
Program Name: Bickford Cottage Burlington
Address: 3301 Sterling Dr Burlington, IA 52601
Type of Action: Recertification and Investigations 93888-C, 95233-C, 96118-C, 97248-C, 97295-C, 97607-C, 97245-C
Date(s) of Action: 11/1/21 – 11/3/21
Citation #: 5585

State Rule #	State Rule	Amount of Civil Penalty
481- 69.26(4)	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 Based on interview and record review, the facility failed to include 1 of 12 current and discharged tenants' identified needs in their service plans (Tenant C3). Findings follow: Record review revealed the following: a. A Progress Note for Tenant C3 signed by the program's Former Registered Nurse Coordinator (RNC) on 11/13/20. The note identified Tenant C3 declined and needed more assistance with toileting, dressing, bathing and hygiene. Tenant C3 received physical therapy two times a week for safety and strengthening. Tenant C3 was able to ambulate with a walker and an assist of one. She'd had a few falls and was noted to be a high fall risk with level one interventions. Tenant C3 had +2 edema in her feet. b. Tenant C3's Service Assessment, developed 11/13/20, indicated Tenant C3 required the use of a walker with the assist of one. Staff were not to leave her side when ambulating. Tenant C3 used a wheelchair when she felt weak. Tenant C3 was noted to be a high fall risk with level one interventions. One of the fall prevention interventions for Tenant C3 was to keep hygiene/toiletry items in the bathroom. c. The Former RNC placed a note in the Communication Log on 11/16/20 which noted, "Family says USE A GAIT BELT or put her in a wheelchair. Someone can follow with a wheelchair. She will be getting therapy. This	\$3500.00

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	should decrease falls. Needs to be toileted every two hoursQQ If an aide leaves at 1:30 PM, the second aide should check her before three and the aide coming on should be checking her ALSO. Use cream on her buttocks. She is weaker and has declined." The staff, including Staff C, signed they had read the message. d. Tenant C3 had an appointment with her Primary Care Provider (PCP) on 12/3/21. According to the note, she had the appointment to discuss worsening mobility and to be evaluated for a wheelchair. Tenant C3 had known arthritis, poor mobility and had fallen twice trying to use a walker. Her legs were quite weak. They'd tried the walker multiple times without success. She was not having pain unless she fell. Tenant C3 qualified for a wheelchair and the program was to help her determine the appropriate size. e. Tenant C3 returned to her PCP on 12/18/21 for additional information on her wheelchair as well as a check to see if she had a urinary tract infection (UTI). The note indicated she was unable to get to activities or meals without a wheelchair. The wheelchair helped with ADLs, including self-grooming/access to toileting and the sink. Tenant C3 was unable to propel herself, the PCP was unsure if this was a physical or mental/confusion issue. Tenant C3's behavior had been different lately with more confusion, so she was going to be tested for a UTI. f. Program Progress notes revealed Tenant C3 started on an antibiotic for a UTI on 12/18/21. The antibiotic was changed on 12/21/21 g. An incident report documented a CNA assisted Tenant C3 to the bathroom on 12/28/20. Tenant C3 lost her balance and fell forward to the floor. The CMA was called and found Tenant C3 laying face down with her upper body in the living room area and her lower body in the bathroom. She was checked, rolled over onto her back and then moved to a sitting position. Three staff helped her up with a gait belt and then helped her on to the toilet. Tenant C3 had a cut by her right eye which was cleaned and ice was applied to this. The RN was contacted as well as Tenant C3's family, who took	
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	Tenant C3 to the emergency room. The Incident Report identified this event occurred at 1:30 AM. Tenant C3 was sent to the University of Iowa Hospital and Clinics with a brain bleed. Further record review revealed the tenant did not return to the Program following the incident and required skilled nursing level of care. According to a transfer summary, Tenant C3 was mobile with a walker or wheelchair and an assist of one person. Staff C added a statement to the 12/28/20 incident in which she wrote, "I was assisting (Tenant C3) to the bathroom for a night check when she lost balance and fell face first." The statement was dated 12/27/20. On 9/29/21, Staff C reported she got Tenant C3 up to use the bathroom. Tenant C3 had urinated during the night and her protective undergarment and nightgown were wet. Staff C got Tenant C3 up and walked with her across the living room to a grab bar attached to the wall outside of her bathroom. Staff C walked away from Tenant C3 towards the closet to get the tenant a dry nightgown and protective undergarment, a distance of about 24 inches. As she reached for the doorknob, she heard Tenant C3 hit the floor. Staff C did not use a wheelchair or gait belt to take Tenant C3 to the bathroom. On 9/29/21 at 12:35 PM, Staff E reported Tenant C3 was pretty much a 2-person assist. Tenant C3 was very unsteady around the time of her fall. Staff E would not have left her side. At times, staff were using a gait belt with Tenant C3. Staff E was using a wheelchair to take Tenant C3 into the bathroom where Tenant C3 would hold onto the grab bar and get onto the toilet. On 9/30/21 at 8:40 AM, Staff M reported she would keep her hands on Tenant C3 when she was walking and have her use her walker. Staff M would not have left Tenant C3 alone. She described Tenant C3 as very unsteady and dizzy in the morning and Staff M would often use the tenant's wheelchair. Staff M would use	
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	Tenant C3's walker to take her to meals when she was more steady on her feet. On 10/12/21 at 1:00 PM, the Director and RNC confirmed the Former RNC had directed staff to follow these directives. They were not in her Service Plan.	
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