

DEPARTMENT OF INSPECTIONS AND APPEALS

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>S0138</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>04/27/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>AVOCA LODGE ASSISTED LIVING</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>610 EAST YORK ROAD AVOCA, IA 51521</b>
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(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	<p>Initial Comments</p> <p>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.</p> <p>Number of tenants without cognitive impairment: 11 Number of tenants with cognitive impairment: 0 Total census: 11</p> <p>The following regulatory insufficiencies were cited during the recertification visit conducted to determine compliance with certification rules for an Assisted Living Program.</p>	A 000	<p><b>POC 6/28/23</b></p>	
A 135	<p>481-69.22(1) Evaluation of Tenant</p> <p>69.22(1) Evaluation prior to occupancy. A program shall evaluate each prospective tenant's functional, cognitive and health status prior to the tenant's signing the occupancy agreement and taking occupancy of a dwelling unit in order to determine the tenant's eligibility for the program, including whether the services needed are available. The cognitive evaluation shall utilize a scored, objective tool. When the score from the cognitive evaluation indicates moderate cognitive decline and risk, the Global Deterioration Scale (GDS) shall be used at all subsequent intervals, if applicable. If the tenant subsequently returns to the tenant's mildly cognitively impaired state, the program may discontinue the GDS and revert to a scored cognitive screening tool.</p> <p>This REQUIREMENT is not met as evidenced by: Based on interview and record review, the Program failed to evaluate the health status prior to occupancy for 1 of 2 tenants reviewed (Tenant</p>	A 135	<p>Avoca Lodge will update and manage evaluations on prospective tenants.</p> <p>Tenant # 2's chart contains a health status evaluation from the day of admission scanned into her documents.</p> <p>All prospective tenants will have an evaluation completed prior to occupancy.</p>	6/28/23

DIVISION OF HEALTH FACILITIES - STATE OF IOWA  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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A 135	Continued From page 1  #2). Finding follows:  1. On 4/26/23 review of Tenant #2's chart revealed an occupancy date of 6/16/22. The Program Registered Nurse (RN) completed an initial evaluation dated 6/16/22, which included cognitive and functional status, but failed to include an evaluation of Tenant #2's health status.  2. On 4/27/23 at 8:20 a.m. the Administrator confirmed she was unable to locate a health evaluation for Tenant #2 prior to occupancy.	A 135		
A 420	481-69.27(1)a Nurse Review  69.27(1) If a tenant does not receive personal or health-related care, but an observed significant change in the tenant's condition occurs, a nurse review shall be conducted. If a tenant receives personal or health-related care, the program shall provide for a registered nurse:  a. To monitor, at least every 90 days, or after a significant change in the tenant's condition, any tenant who receives program-administered prescription medications for adverse reactions to the medications and to make appropriate interventions or referrals, and to ensure that the prescription medication orders are current and that the prescription medications are administered consistent with such orders  This REQUIREMENT is not met as evidenced by: Based on interview and record review, the Program failed to provide 90-day nursing assessments for 2 of 2 sample tenants reviewed (Tenant #1 and Tenant #2). Finding follows:	A 420	All tenants will have a new assisted living evaluation and global deterioration scale completed.  DON or designee will complete assisted living evaluations and global deterioration scale's completed every 90 days or after a significant change in condition.  DON or designee will add calendar reminders for assessments for every 90 days.	6-28-23

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A 420	<p>Continued From page 2</p> <p>1. On 4/26/23, record review for Tenant #1 revealed the most recent nursing assessment in her chart was dated 8/28/22. No additional 90-day nursing assessments could be located in her record.</p> <p>On 4/26/23 at 2:45 p.m., the administrator confirmed she could not locate a more recent 90-day nursing assessment for Tenant #1.</p> <p>2. On 4/26/23, record review for Tenant #2 revealed an occupancy date of 6/16/22. The Registered Nurse completed a nursing assessment/health review on 7/07/22 and 10/20/22. No further 90-day nursing assessments could be located in Tenant #2's record.</p> <p>On 4/27/23 at 8:20 a.m., the administrator confirmed she could not locate a more recent nursing assessment for Tenant #2.</p>	A 420		
A 465	<p>481-69.28(5) Food Service</p> <p>69.28(5) Personnel who are employed by or contract with the program and who are responsible for food preparation or service, or both food preparation and service, shall have an orientation on sanitation and safe food handling prior to handling food and shall have annual in-service training on food protection.</p> <p>This REQUIREMENT is not met as evidenced by: Based on interviews and review of employee training, the facility failed to ensure initial and annual training regarding food safety and sanitation. This affected 3 of 3 staff reviewed (Staff A, Staff B and Staff C). Findings follow:</p>	A 465	<p>All lodge employees will be educated on safe food handling and sanitation.</p> <p>All lodge employees will be assigned annual training upon hire to prevent education from being missed.</p> <p>HR will review relias training and education completions monthly.</p>	6-28-23

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A 465	<p>Continued From page 3</p> <p>1. On 4/26/23 the Program provided a list of the Assisted Living Program (ALP) staff, which included three Personal Service Attendants. The three staff served food to the tenants at meal times, as part of their routine job duties. When asked for documentation of training for the three staff regarding food safety and sanitization, the Program provided a certificate of training for Staff A dated 7/28/09. Staff A had worked at the program since 2003. The Program was unable to provide initial food safety training for Staff B, who was hired 01/06/21 or for Staff C, who was hired 8/25/20. The Program failed to locate annual sanitation and food safety training for any of the three staff.</p> <p>2. On 4/17/23 at 8:20 a.m. the administrator confirmed the above information.</p>	A 465		