

**Iowa Department of Inspections, Appeals & Licensing**  
**Health and Safety Division**  
**Adult Services Civil Penalty Citation**

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| <b>Date:</b> January 29, 2024                                      |
| <b>Program Name:</b> Grand Living at Bridgewater ALP/D             |
| <b>Address:</b> 3 Russell Slade blvd. Coralville, IA 52241         |
| <b>Type of Action:</b> Recertification and Investigation #111481-I |
| <b>Date(s) of Action:</b> 9/18/2023-10/5/2023                      |
| <b>Citation #:</b> 10181                                           |

| <b>State Rule #</b> | <b>State Rule</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>Amount of Civil Penalty</b> |
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| <b>67.2(3)</b>      | <p><b>Policies &amp; Procedures</b><br/> <b>67.2(3) The program shall follow the policies and procedures established by the program</b></p> <p>Based on interview and record the Program failed to follow policies and procedures related to door alarm response, missing tenant and head injuries. This pertained to 1 of 1 tenant reviewed that eloped (Tenant #1) and 2 of 2 tenants reviewed that fell and hit their head (Tenant #2 and Tenant #6). Findings follow:</p> <p>The Program was a dedicated dementia specific program comprised of two memory care units, one on first floor and one on second floor, both required to have operating door alarms. Tenant #1 resided on the first floor memory care unit. The memory care units were attached by structure to a general population assisted living program, which was not required to have door alarms.</p> <p>1. Record review on 9/26/23 of Tenant #1's file revealed an 3/5/23 at 3:26 p.m. Tenant #1 eloped. The incident report indicated staff heard the door alarm, completed a head count, and called the front desk to see if she had seen Tenant #1. The front desk staff had not seen him. The front desk staff called back and said Tenant #1 was outside. Activity staff assisted him back into the building and took him for a walk inside. The incident report indicated the on-call nurse was notified on 3/5/23 at 3:30 p.m. Tenant #1's family was notified 3/6/23 at 5:00 p.m. the primary care provider (PCP) on 3/6/23 at 5:28 p.m. There were no vital signs recorded on the incident report and it indicated there were no injuries. The incident report also indicated there were no witnesses.</p> <p>Record review of the Program's investigation materials indicated the Assistant Director of Health and Wellness (ADOHW) reviewed an incident report on 3/6/23 and became aware Tenant #1 had eloped on 3/5/23. The ADOHW interviewed Staff H and Staff I who worked at the time of the elopement. They reported they were helping other tenants when the door alarm went off. They ensured safety of the tenants they worked with and checked the door alarm. They did not see anyone at the door and completed a head count. It was noted Tenant #1 was missing. Staff called the front desk staff and she had not seen him. Less than 10 minutes later the front desk staff called</p> | <b>\$1,500.00</b>              |

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|  | <p>back and said Tenant #1 was outside. Staff on duty brought him back to the unit. The staff on duty did not contact the Executive Director or the on-call nurse.</p> <p>The Executive Director and an interim staff, interviewed Staff J related to the elopement. Staff J took Tenant #1 and another tenant to an activity outside of the memory care unit on 3/5/23. After the activity Staff J returned to the unit with Tenant #1 and the other tenant. She "dropped him off", once Tenant #1 was inside and the door was locked, Staff J left with to take the other tenant back to the second floor memory care unit. She returned the other tenant to the unit and took the elevator back downstairs. The receptionist asked Staff J if she had seen Tenant #1 and Staff J said she just returned him to the unit. The receptionist told her he was missing and at that time Tenant #1 walked into the front main entrance (of the general population section of the building). Staff J reported Tenant #1 wore his hat and coat and he did not wear them when she left him five minutes prior.</p> <p>Review of the Program's investigation revealed the final summary indicated from the time from when the door alarm sounded until Tenant #1 was brought back was 10 minutes. It was clarified Staff J returned Tenant #1 to the unit and not Staff H and Staff I. Tenant #1 went outside as he was seen walking into the front entrance of the building. The temperature was approximately 32 degrees and he was wearing a coat and hat. It was determined Tenant #1 put on his coat and hat and left shortly after retuning from the activity. Staff did not report the elopement to the ADOHW or the Executive Director or nurse-on call. Tenant #1 did not sustain any injuries.</p> <p>Continued record review revealed verbal re-education was provided to Staff H and Staff I regarding thoroughly checking inside and outside the door as they had only checked inside the door and then started the head count. Staff J was provided verbal re-education to inform staff when she was taking a tenant to an activity and returning a tenant from an activity.</p> <p>When interviewed on 9/27/23 at 1:55 p.m. Staff H said she worked second shift and heard the door alarm for memory care entrance door. She was in another tenant's apartment assisting a tenant. After a short period, she responded, checked the doors, did a head count and determined Tenant #1 was unaccounted for. Another staff also came to assist. The front desk staff was called and within a few minutes they called and he was located. She said he did not have a coat, but was happy and had no injuries. He said he was going for a walk. The nurse on-call (from a different building) was notified. Staff H said she completed an incident report. She had last seen Tenant #1 about 2:30 p.m. at shift change when a head count was completed.</p> <p>When interviewed on 10/4/23 at 2:30 p.m. the Executive Director said the ADOHW notified her of Tenant #1's elopement on 3/6/23. The ADOHW reported staff heard the door alarm, secured the tenants they worked with and responded, but did not check outside</p> |  |
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|  | <p>of the door. They started a head count and noted he was missing. Staff called the receptionist, who then called back later and said Tenant #1 was outside. The Executive Director and an interim staff interviewed Staff H, Staff I and Staff J. Staff J reported she had Tenant #1 at activity with another tenant and took him back to the unit and then took the other tenant back. She took the elevator downstairs and the receptionist asked if she had seen Tenant #1 and he came walking back in the door. Staff J did not tell the staff Tenant #1 was back when she dropped him off. Staff H and Staff I told the Executive Director they did not check the outside of the door that alarmed. Both staff were in other apartments when it occurred and they were not sure if he was still with Staff J. She said she found out later staff called the nurse on-call (nurse from another building).</p> <p>When interviewed on 10/4/23 at 3:14 p.m. the ADOHW said she could not remember how she found out but it was written documentation regarding Tenant #1's elopement on 3/5/23. She found out on Monday (3/6/23). She said staff heard the door alarms go off and called the front desk. The front desk staff had not seen Tenant #1 and then called back and said he was back in the building. Staff H and Staff I called the nurse on-call (nurse from a different building). The ADOHW was not notified at that time of the incident. Tenant #1 did not sustain any injuries. She said Staff H and Staff I did not look out the door that alarmed. The ADOHW followed up and notified Tenant #1's family and the PCP.</p> <p>Record review of door alarm records indicated the Staff J opened the memory care first floor door at 3:13 p.m. Door alarm records indicated the memory care first floor door was "door forced" at 3:21 p.m.</p> <p>The State Climatologist provided the following weather conditions at 4:00 p.m. at the Iowa City Municipal Airport: temperature was 50 degrees, relative humidity was 56%, winds were from the east at 16 miles per hour (mph), with gusts to 24 mph. It was overcast with no precipitation.</p> <p>There were no witnesses to Tenant #1's elopement. The video footage at the time of elopement was not available at the time of investigation. The video footage was not reviewed by Program staff at the time of the elopement. It could not be determined the path or Tenant #1's whereabouts during the elopement. It was determined he left the unit via the memory care door and he was observed outside the building returning via the main front entrance (general population section of the building). The path and terrain Tenant #1 traveled could not be observed at the time of the investigation.</p> <p>Record review of Tenant #1's file revealed he was staged at a five on the Global Deterioration Scale, which indicated moderately severe cognitive decline. The Master Assessments dated 1/20/23 and 4/20/23 indicated under the Elopement Risk Evaluation, Tenant #1 wandered and had unsafe wandering out of the building with staff on 1/7/23. It indicated he exhibited exit seeking behavior and was</p> |  |
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|  | <p>ambulatory. After Tenant #1's elopement on 3/5/23 there was no documented evaluation (see 69.22 (3) for more information). The service plan in place at the time of the elopement indicated elopement interventions, wellness checks and wandering.</p> <p>Record review of the Program's Dementia Specific Exit Doors policy and procedure indicated when a door alarm sounded staff would promptly check the door. The area inside and outside the door would be "thoroughly" checked. All tenants would be accounted for and if a tenant was not accounted for the Missing Resident policy and procedure would be initiated.</p> <p>The Program's Missing Resident policy and procedure indicated staff would check the sign out sheet to determine if the tenant had left the building. If the tenant was not signed out, staff would then notify the nurse or designee. A search would be completed of the tenant's apartment and surrounding common areas. The nurse or designee would notify the Executive Director or designee, who would notify the family and determine if the tenant was with family. After a search of the grounds was completed law enforcement would be notified. When the tenant was located all staff would immediately be notified and the nurse or designee would complete an evaluation of the tenant. The tenant would be examined for any injuries, the family would be notified and provided a report of what had occurred, the incident report would be completed and placed in the file, the PCP would be notified and the Department would be notified.</p> <p>In summary, Tenant #1, who had left the building previously with staff on 1/7/23 and who had known exit seeking and wandering behavior, eloped on 3/5/23. Staff responded to the door alarm to the memory care entrance door but staff failed to check the outside of the door that alarmed as required by the policy and procedure. Tenant #1 returned into the building and it was not determined how he exited the building or the path traveled to return to the building. Staff notified the nurse on-call (nurse from another building); however, the Executive Director was not notified of elopement until 3/6/23. An evaluation of Tenant #1 was not completed post elopement as required by policy and procedure and the incident report lacked documented vital signs, despite Tenant #1 being observed outside. Tenant #1's family and PCP were also not notified until 3/6/23 at 5:00 p.m. and 5:28 p.m., respectively. Staff did not follow the door alarm and missing tenant policies and procedures related to Tenant #1's elopement.</p> |  |
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