DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	S0166	A. BUILDING: _____ B. WING _____	C 09/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
APPLE VALLEY PLACE	405 27TH AVENUE SOUTH CLEAR LAKE, IA 50428

(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	Initial Comments Assisted Living Programs for People with Dementia are defined by the population served. The census numbers were provided by the Program at the time of the on-site. Tenants without cognitive impairment: 49 Tenants with cognitive impairment: 12 Total census: 61 No regulatory insufficiencies were cited during the investigation of Incident and Complaints 131408-I, 131607-C, 132670-I and 132752-C. The following regulatory insufficiencies were cited during the investigations of 131689-C and 132421-C .	A 000		
A 122	481-67.3(2) Tenant Rights 481-67.3(231B,231C,231D) Tenant rights. All tenants have the following rights: 67.3(2) To receive care, treatment and services that are adequate and appropriate. This REQUIREMENT is not met as evidenced by: Based on interview and record review, the program failed to ensure the provision of adequate and appropriate care, treatment, and services for 1 of 2 tenants (Tenant #2) reviewed who received pain medication. Findings follow: Observations on 9/1/26 at 2:30 revealed Staff A administered tramadol to Tenant #2. During observations Staff A stated he relied strictly on the Medication Administration Record (MAR) to	A 122		

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A 122	Continued From page 1 determine which medications tenants received. Record review on 9/1/26 revealed Tenant #1's MAR. Review of the MAR revealed Tenant #1's tramadol had been discontinued by the pharmacy on 6/11/26 and resumed on 6/24/26. The MAR confirmed the program failed to administer 39 doses of tramadol to Tenant #1 during this 13-day period (6/11/26 to 6/24/26). Review of Tenant #2's service plan dated 10/31/25 revealed the tenant needed total assistance with medication administration. The plan noted staff would administer and order all medications as presribed. The plan also included the tenant's need for nursing services to order medications. When interviewed on 9/2/26 at 5:05 p.m. the Director stated the pharmacy discontinued Tenant #2's tramadol and sent a message, but the former nurse and/or Program staff failed to note the tramadol had been discontinued. The physician did not discontinue the medication. The Director confirmed the Program had responsibility to ensure Tenant #2's tramadol was available and administered for pain. The nurse's oversight resulted in Tenant #1 going without pain medication for 13 days (39 doses).	A 122		
A 125	481-67.3(5) Tenant Rights 481-67.3(231B,231C,231D) Tenant rights. All tenants have the following rights: 67.3(5) To receive from the manager and staff of the program a reasonable response to all requests. This REQUIREMENT is not met as evidenced by:	A 125		

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A 125	Continued From page 2 Based on interview and record review the Program staff failed to respond to a teanant request to review and/or explain billing statement/practices. This pertained to 1 of 1 former tenant (Tenant C1) reviewed. Finding follows: Tenant C1 contacted the Department March 2026. He explained the Program could not explain his bill to him. During an interview on 9/1/26 at 10:36 a.m. the former tenant's Case Manager (CM) stated she attempted to assist the tenant, but the program failed to explain the charges to him. The CM expressed concern that the program served Tenant C1 a notice to vacate due to past due amounts while remaining unable to explain the billing process or specific charges for his apartment and care. The CM stated she spoke directly to the Program Director several times regarding the matter, and the Director claimed the issue had been "fixed." During the exit on 9/1/26 at 5:30 p.m., the administrative team acknowledged the Program Director failed to provide the former tenant with a responsible response regarding his billing concerns.	A 125		
A 191	481-67.9(1) Staffing 481-67.9(231B,231C,231D) Staffing. 67.9(1) Number of staff. A sufficient number of trained staff shall be available at all times to fully meet tenants' identified needs. This REQUIREMENT is not met as evidenced by: Based on observations, interviews, and record	A 191		

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A 191	Continued From page 3	A 191		

review, the Program failed to consistently provide an adequate number of appropriately trained staff to meet tenants' needs. This pertained to 1 of tenant 1 (Tenant #3) observed receiving toileting assistance. Findings follow:

Observations on 9/1/26 at 10:08 a.m. Staff B asked Tenant #3 if she needed to use the restroom, and Tenant #3 confirmed she did. Staff B called for additional staff assistance. Before the assistance arrived, Staff B attempted to transfer Tenant #3 from her recliner into a wheelchair using a gait belt. Staff B stated Tenant #3 required a two-person assist, but because the memory care unit only had one staff, she had to call for help from the assisted living side of the building. Tenant #3 attempted to assist with the transfer.

Continued observation on 9/1/26 at 10:15 a.m. revealed Tenant #3 stated, "It's too late." Staff B asked if she had urinated, and Tenant #3 confirmed, "A little." At 10:33 a.m., while waiting on the toilet, Tenant #3 yelled out, "Are you going to help me?" Staff B and Staff C utilized a gait belt and encouraged Tenant #3 to use the grab bars to complete the transfer. Once seated back in her wheelchair at 10:35 a.m., Tenant #3 stated, "Take me home."

When interviewed on 9/1/26 at 10:35 a.m. Staff C confirmed that Tenant #3 required a two-person assist "more often than not." Staff C further confirmed the memory care unit the Program staffed a ratio of one staff member to 10 tenants. On 9/1/26 at 2:30 p.m., Staff A confirmed Tenant #3 required a two-person assist "more often than not" and verified the Program typically assigned one staff to work the memory care area.

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A 191	Continued From page 4 During the exit on 9/1/26 at 5:30 p.m. the administrative staff confirmed the Program scheduled one staff to cover the needs of memory care tenants and three to cover assisted living. Memory Care staff had been directed to call for assistance from assisted living staff. The Director said on 9/1/26 the Program only had two staff in the assisted living area of the building.	A 191		