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
	S0400	A. BUILDING: _____ B. WING _____	C 07/23/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRAND LIVING AT INDIAN CREEK	325 COLLINS ROAD SE CEDAR RAPIDS, IA 52403

(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 are defined by the type of population served. The census numbers were provided by the Program at the time of the on-site. Tenants without cognitive impairment: 129 Tenants with cognitive impairment: 1 Total census: 130 The following regulatory insufficiencies were cited related to the investigation of Complaints#131308-C and #131366-C: ========== 231C.16A Medication setup - administration and storage of medications. 1. An assisted living program may provide for medication setup if requested by a tenant or the tenant's legal representative. If medication setup is provided following such request, the program shall be responsible for the specific task requested and the tenant shall retain responsibility for those tasks not requested to be provided. 2. If medications are administered or stored by an assisted living program, or if the assisted living program provides for medication setup, all of the following shall apply: b. Medications, other than those self-administered by the tenant or provided	A 000		

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A 000	Continued From page 1	A 000		

through medication setup, shall be stored in locked storage that is not accessible to persons other than employees responsible for administration or storage of medications.

This REQUIREMENT is not met as evidenced by:

Based on interview and record review the Program failed to store medications in place only accessible to staff administering the medications. This pertained to 1 of 4 tenants reviewed (Tenant #1). Findings follow:

1. Record review on 7/15/26 and 7/20/26 of Tenant #1's file revealed staff administered her medications.

Continued record review revealed the April to June 2026 medication administration records (MARs) reflected an order for calcitonin spray 200/actuation spray. One spray in alternating nostrils daily.

2. Continued record review of the Program's policy and procedure related to medications indicated medications other than those self-administered by the tenant or via medication set up would be stored in locked storage and would not be accessible to people other than staff responsible for medications.

3. When interviewed on 7/23/26 at 11:04 a.m. and 4:09 p.m. the Director of Health and Wellness said regarding Tenant #1's nasal spray, it was refrigerated and was allowed to be kept in her room per her primary care provider (PCP). Staff administered the nasal spray, once in a while she would insist to administer it but it was preferred that staff administered it. The Director

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A 000	Continued From page 2 of Health and Wellness confirmed the nasal spray was not locked and the original order from the PCP was not located.	A 000		
A 152	481-67.5(2)e(3) Medications 481-67.5(231B,231C,231D) Medications. 67.5(2)?Each program shall follow its own written medication policy, including the following: e. When medications are administered traditionally by the program: (3) Medications and treatments will be administered as prescribed by the tenant's physician, advanced registered nurse practitioner or PA. This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program failed to administer medications as ordered. This pertained to 3 of 4 tenants reviewed (Tenants #1, #2 and #3). Findings follow: 1. Record review on 7/15/26 and 7/20/26 of Tenant #1's file revealed staff administered her medications. The February 2026 medication administration record (MAR) reflected an order for calcitonin spray 200/actuation nasal spray. One spray in alternating nostrils daily. It was documented as not administered seven times in February. The reasons charted included: other, refused and awaiting pharmacy. It was documented four times as not administered due to the medication not being available (awaiting	A 152		

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pharmacy). It was also noted the MAR did not reflect the nostril it was adminsitered in (alternative nostrils daily).

Continued record review revealed the February 2026 MAR also reflected an order for lidocaine pad 4%, apply topically one patch to skin daily, 12 hours on and 12 hours off. It was documented as not administered 10 times in February. The reasons charted included: other, self-administered, needed a refill and awaiting pharmacy. It was documented as not administered 7 times due to not being available (needed a refill or awaiting pharmacy). Also, on 2/14/26 in the a.m. it was charted as not available (awaiting pharmacy) and the p.m. (removal of the patch) was documented as completed.

Further record review revealed the April to May 2026 MAR (4/15/26 to 5/14/26) reflected an order for calcitonin spray 200/actuation spray. One spray in alternating nostrils daily. It was documented as not administered four times. The reasons charted included: other and awaiting pharmacy. It was documented three times as not administered due to not being available (awaiting pharmacy).

2. Record review on 7/15/26 and 7/20/26 of Tenant #2's file revealed staff administered her medications. The February 2026 MAR reflected an order for Mounjaro injection 10 milligrams (mg)/0.5 milliliter (ml), inject 0.5 ml under the skin once weekly. It was documented as not administered on 2/23/26, due to awaiting pharmacy. It was not available to administer.

Continued record review also revealed an order for Gemtesa tablet 75 mg, one tablet by mouth

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A 152	Continued From page 4	A 152		

daily. It was documented as not administered on 2/18/26 due to awaiting pharmacy. It was not available to administer.

3. Record review on 7/15/26 of Tenant #3's file revealed staff administered his medications. The April to May 2026 MAR (4/15/26 to 5/14/26) reflected an order for Yuperlri solution, inhale one vial via nebulizer, by mouth daily. It was documented as not administered on 4/22/26 due to awaiting pharmacy.

Continued record review of the MARs revealed hydrocolloid film, cut, fit and apply to all open sores and leave on for up to three days was documented as not administered on 5/2/26. Eliquis 5 mg tablet, one tablet twice daily was documented as not administered on 5/10/26 due to awaiting pharmacy.

Further record review of the June to July MAR (6/15/26 to 7/14/26) revealed Jardiance 10 mg tablet, one tablet by mouth daily was documented as not administered on 5/25/26 due to awaiting pharmacy. Tamsulosin capsule 0.4 mg, 1 capsule by mouth daily was documented as not administered on 5/26/26 and 5/27/26 due to awaiting pharmacy. Mepilex dressing was documented as not completed on 6/20/26, 6/28/26 and 6/29/26 due to awaiting pharmacy.

4. When interviewed on 7/23/26 at 11:04 a.m. the Director of Health and Wellness said Tenant #1's nasal spray was harder to get from the pharmacy and they often said it was too soon to refill. Regarding Tenant #2's Mounjaro they were waiting for pharmacy. For Tenant #3 he was out of the building on vacation 4/22/26 and gone on

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A 152	Continued From page 5 5/13/26 overnight. She forgot to put him on a leave of absence. She confirmed all of the MARs requested were provided.	A 152		