Iowa Department of Inspections and Appeals
Assisted Living Program
Re-certification Monitoring Evaluation Report

Assisted Living Program:

Jill Knipp, Director
Bickford Cottage
5101 University Avenue
Cedar Falls, IA 50613

Date of Monitoring Visit:

November 17, 2004

Monitor(s):

Stephanie Cummins, SW

Definitions:

The following definitions are relevant:

Regulatory Insufficiency - A violation of a statutory or rule provision within the Iowa Code or Iowa Administrative Code (IAC) governing assisted living programs. A regulatory insufficiency requires a plan of correction to be presented to, and approved by, the Department of Inspections and Appeals (DIA).

Plan of Correction - A written response to one or more regulatory insufficiencies that are rule violations [321 IAC 25.8(3)]. The plan should identify how, and by a specific date, an insufficiency will be corrected. The plan is due to DIA within ten (10) working days of the program's receipt of a Re-certification Monitoring Evaluation Report. Depending on the circumstances, DIA may re-visit the assisted living program to confirm progress in fulfilling a plan's corrective measures.

Dementia-specific assisted living program - An assisted living program certified under this chapter that either serves five or more tenants with dementia or cognitive disorder staged between 4 and 7 on the Global Deterioration Scale or holds itself out as providing specialized care for persons with cognitive disorder or dementia, such as Alzheimer's disease, in a dedicated setting.

Overview:

An on-site monitoring evaluation was conducted at Bickford Cottage on November 17, 2004. In preparing this report, the following information was considered:

Current Program Census:

General Population Program (GPP) **– A program that is not a Dementia Specific program, but may have tenants with cognitive disorder.**

Current number of tenants without cognitive disorder:	20
Current number of tenants with cognitive disorder:	21
Total Population:	41

Dementia Specific Program (DSP) **–** Not applicable.

Tenant/Family Satisfaction Results – Results of the community meeting and tenant and family interviews indicated the tenants were satisfied with the staff at the program. Tenants stated the staff members were helpful and were trained sufficiently to help the tenants. Family interviews indicated the staff at the program go above and beyond what is required and stated it was the extra little things the staff do that mean so much to both families and tenants. Tenants stated that the food served at the program overall was good but could be warmer in temperature. The tenants also stated there could be a larger variety of activities offered by the program; however, several tenants stated the program had a difficult time getting these activities implemented due to lack of participation. Tenants and family members stated the program was well maintained and was kept clean. The tenants stated the staff knocked prior to entering the apartments and respected their privacy. The tenants felt safe at the program.

Complaint History – During this certification period, there were substantiated complaints in the areas of Exclusion of a Tenant, Medications, Occupancy Agreement, Record Access, and Evaluation of a Tenant.

On-Site Monitoring Evaluation – The monitor(s) made the observations detailed in the following areas.

A. Medications – Program has a comprehensive written medication policy that allows tenant self-administration, but accommodates the need for tenant medication assistance via nurse delegation. The medication assistance is appropriately supervised and administered. Medications are appropriately stored. [321 IAC 25.29(1) and/or (2)]

Monitoring Observation: An interview with the RN indicated that the program administered medications to 40 of the 41 tenants. Of those 40 tenants 6 tenants received reminders from staff on a daily basis. These reminders were recorded on the Medication Administration Record (MAR). According to the RN the staff signed off on the MAR to show that they had reminded the tenant to take the medication. The tenants that received routine dosing schedule reminders had medications that were set up by family, pharmacy and the tenant. The program did not set up the medications for these tenants that received routine reminders for medications. The medications were kept in a secured location in the tenants' apartments.

- Regulatory Insufficiency: The program did not appropriately set up and document medications for tenants that required routine reminders of medications.

Dated this 30th day of November 2004.