Iowa Department of Inspections and Appeals
Assisted Living Program
Re-certification Monitoring Evaluation Report – (Amended)

Assisted Living Program:

Ms. Dorothy McHone
Oak Estates
110 Alice Street
Conrad, IA 50621

Date of Monitoring Visit:

November 23, 2004

Monitor(s):

Hal L. Chase RN BSN MPH

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 Oak Estates on November 23, 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:	**11**
Current number of tenants with cognitive disorder:	**2**
Total Population:	**13**

Tenant/Family Satisfaction Results – Seven tenants were present at the community meeting. Tenants stated that the staff was very helpful and friendly. Staff was patient and respectful and provided the ultimate privacy. Tenants also stated that Dorothy was an excellent administrator. Tenants felt that they were in charge of their lives and overall were satisfied with their current living arrangements. The only issue raised by tenants was the quality and choice of foods that were given. Tenants stated that they have had numerous discussions with staff regarding food with no resolution. Tenants were advised to visit again with the Dietician and the Administrator to come up with a remedy that everyone would be happy with.

Complaint History – There were no substantiated complaints this certification period.

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

A. Occupancy Agreement – The program shall enter into an occupancy agreement with the tenant or tenant's legal representative, if applicable, prior to the tenant's taking occupancy that clearly describes the rights and responsibilities of the tenant and of the program, and shall sign a managed risk policy disclosure statement. [321 IAC 25.22]

Monitoring Observation: Leadership staff reported that occupancy agreements were not always signed by the tenant(s) prior to occupancy. A review of three of four tenants files indicated that the occupancy agreement was signed after the tenant took occupancy.

- Regulatory Insufficiency: The program did not have tenants sign the occupancy agreement prior to receiving services and taking occupancy.

B. Evaluation of Tenant - The program evaluates each tenant's functional and cognitive abilities and health status and the determination of needed services as required. [321 IAC 25.23(1) and/or (2)]

Monitoring Observation: Leadership staff reported that the program was not completing a cognitive evaluation prior to admission or within 30 days of admission.

- Regulatory Insufficiency: The program did not evaluate the cognitive ability of tenants prior to admission and within 30 days of admission.

C. Service Plan – Prior to occupancy a preliminary service plan shall be developed by a health care professional or human service professional in consultation with the tenant or legal representative, and shall be signed by the tenant or legal representative [321 IAC 25.28 (1)]. When a tenant needs personal care or health-related care, the service plan shall be updated within 30 days of occupancy by a multidisciplinary team that consists of no fewer than three individuals, including a health care professionals and appropriate staff, and with the tenant or legal representative [321 IAC 25.28 (3)]

Monitoring Observation: A review of three tenant files indicated tenants had not signed the service plan prior to and within 30 days of admission to the program. Leadership staff confirmed this during the exit meeting. Service plans updated within 30 days of admission did not have the three staff signatures in addition to the tenant's signature.

- Regulatory Insufficiency: The program did not have tenants sign the service plan prior to admission to the program and again within 30 days.
- Regulatory Insufficiency: The Program did not update the service plan for tenants who required personal or health-related care in consultation with a multi-disciplinary team that consisted of three staff members.

D. 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: During the entrance meeting leadership staff reported the program was giving medication reminders to tenants. Leadership staff also reported program staff were setting up medications for tenants and leaving medications in the

tenant's possession. During the monitoring observation on, it was noted the tenant's oral medications were locked in a drawer but topical prescribed medications were left out in the tenant's room.

- Regulatory Insufficiency: The program did not ensure that medications administered by program staff were only accessible to program staff responsible for medication administered to tenants.

E. Nurse Review - Program provides a registered nurse to ensure the appropriate administration and documentation of medications, ensure that physician orders are current, and assess and document the tenants' health related activities. [321 IAC 25.30]

Monitoring Observation: Two of four tenant files reviewed did not indicate that a 90-day nurse review was being completed. Leadership staff confirmed there wasn't a 90-day review completed for tenants who received health related care.

- Regulatory Insufficiency: The program did not monitor, at least every 90 days, each tenant who receives program administered prescription medications or health-related care.

Dated this 17th day of December 2004.