Iowa Department of Inspections and Appeals
Assisted Living Program
Complaint Investigation Report

Assisted Living Program: **Complaint Intake #: 12172**

Cathy Berner, Director
Continental at St. Joseph's
19999 St. Joseph
Centerville, IA 52544

Date of Investigation:

April 1, 2005

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 26.2(5)(a)]. 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 Complaint Investigation 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 321 IAC - chapter 25 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 special care for persons with cognitive disorder or dementia, such as Alzheimer's disease, in a dedicated setting.

Overview:

A complaint investigation on-site visit was conducted at Continental at St. Joseph's on April 1, 2005. In preparing this report, the following information was considered:

Current Program Census:

General Population Program (GPP) – Not applicable

Dementia Specific Program (DSP) – **A program that is a Dementia Specific Program by definition or holds itself out as providing specialized care in a dedicated setting but may have tenants without cognitive disorder.**

Current number of tenants in a DSP that holds itself out as providing specialized care in a dedicated setting:	8
Current number of tenants without cognitive disorder:	34
Total Population:	42

Accreditation Status – Not applicable.

Complaint History – There was a substantiated complaint in the area of medications during this certification period.

Complaint Investigation – The complaint investigator(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]

Complaint Allegation: It is alleged that the program was requiring tenants to move from their existing apartment to an apartment where they would have to share an apartment with another tenant.

- Monitoring Observation: Interview with leadership staff indicated the program had made a decision to close the supportive care unit and move tenants to general population or to memory care. Leadership staff reported the tenants are not required to share an apartment. Tenants that were moved have done so with the tenants' permission.

- Regulatory Insufficiency: None noted.

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)]

During the course of the investigation, it was found that the program did not evaluate tenants when changes occurred in tenant's functional, cognitive abilities and health status.

- Monitoring Observation: Three out of five tenant files reviewed indicated the program did not evaluate tenant's functional, cognitive, and health status; although a change occurred requiring the program to move the tenants to the memory care unit. During the investigation, the monitor learned the program was closing their supportive care unit. A total of eight tenants were identified in supportive care. Three tenants had been transferred to the memory unit, three tenants were to remain in general population and two tenants and their families were approached with the possibility of moving to the memory unit.

- Regulatory Insufficiency: The program did not evaluate tenant's functional, cognitive and health status when changes occurred and when required to transfer tenants to a higher level of care.

- Regulatory Insufficiency: The program did not use a valid scored, objective evaluation tool to assess cognitive ability.

C. Service Plan – Program has an individualized service plan developed and updated for each tenant as required. [321 IAC 25.28]

During the course of the investigation, it was found that the program did not update service plans to reflect the needs of the tenant.

- Monitoring Observation: Five out of five tenant files reviewed indicated the program did not update the tenant's service plan, although a change occurred in the services needed by the tenants.

- Regulatory Insufficiency: The program did not update the individualized service plan reflective of the tenant's needs.

Dated this 8th day of April, 2005

THE CONTINENTAL
at St. Joseph's

19999 St. Joseph's Drive • Centerville, Iowa 52544 • 641.437.1999 • Fax 641.437.4258 • www.thecontinentalonline.com

April 21, 2005

Connie Schaffer
Certification Coordinator- Central Iowa
Adult Services Bureau
Iowa Department of Inspections & Appeals
Lucas State Office Building
321 East 12th Street
Des Moines, IA 50319-0083

Dear Ms. Schaffer

Following is the "Plan of Correction" for the Regulatory Insufficiency cited for the Complaint Investigation # 12172:
Observation A – no regulatory insufficiency was noted

Observation B – The facility has a policy and procedure to provide for evaluations of tenants functional, cognitive and health status when they have a change of condition. In the surveyors observations at the time of the complaint visit, two tenants reviewed were being talked to regarding a physical change in the facility. Due to this change in the facility operation, the facility was talking to the tenant's and their responsible party as the most appropriate location for each tenant would be the Memory care unit. The facility has used the Folstein Mini Mental for initial evaluation of a tenant's cognitive abilities. This form did not have the score on the form, the score was identified on another form used by the facility. The score has been added to the Folstein Mini Mental form. Functional, cognitive and health status evaluations will be done on all tenants at the time of admission, with in 30 days following admission, annually and at the time of a condition change. Cognitive evaluations have been completed on the tenants identified by the surveyor at the time of the investigation. All similar tenants with cognitive decline will be reevaluated by 4-26-05.

Observation C – Service Plans will be reviewed at the time of admission, with in 30 days following admission, annually and at the time of a condition change. The Service Plans will be dated and initialed when they are updated and at the time any changes are made. The Service Plans have been moved to areas on each neighborhood making them more accessible to all staff to more easily make the changes as needed. Annuals, 30 day and significant condition change service plans will be completed by 4-26-05.

Should you have any additional questions, please contact myself at the number above.

Sincerely,

Cathy Berner, Community Manager
The Continental at St Joseph's