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

Assisted Living Program:

Rick Burke, Manager
Willow Pointe
17396 Kingbird Avenue
Mason City, IA 50401

Date of Monitoring Visit:

April 27, 2005

Monitor(s):

Stephanie Cummins, SW, MA

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 Willow Pointe on April 27, 2005. 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:	29
Current number of tenants with cognitive disorder:	4
Total Population:	33

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

Tenant/Family Satisfaction Results – Community meeting was held with tenants and family members. Tenants stated the manager and the staff were personable and responded quickly when assistance was needed. A family member stated they had recently transferred a tenant to the program and staff was helpful and caring throughout the transfer process. The tenants stated activities offered were great and there was plenty to choose from. They liked to tease and joke around with the staff. The apartments and building were always kept clean. The tenants stated the food was good; however, they would like to have more fruits and vegetables and not as many breaded items.

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

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

A. 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: Four tenant files reviewed indicated NCS pharmacy completed a medication review every 90 days for tenants that received medications administered by the program. An RN completed a review of health related care every 90 days for all tenants that received personal or health related care. This review consisted of a health evaluation and a narrative summary in the nurse's note. The RN noted new orders by date and signature but did not time the orders.

- Regulatory Insufficiency: The program did not appropriately document reviews including new physician orders with written documentation of time, date and signature.

B. Transportation – When the program provides transportation services directly or under contract with the program, the services shall be provided as required. [321 IAC 25.38]

Monitoring Observation: The program had a mini van that held five tenants and the driver, which was used for physician appointments and for outings occasionally; however, the mini van did not have any of the required safety equipment. According to the manager the activity director and the manger drove the mini van and both had regular State of Iowa Drivers Licenses.

- Regulatory Insufficiency: The program did not have employees appropriately licensed as required for the vehicle being used for the transportation of tenants.

C. Record Checks – The program conducts applicable employee record checks. [Iowa Code section 135C.33(5)]

Monitoring Observation: Three employee files reviewed indicated the employees did not have complete background checks done prior to hiring. One employee hired on 2-1-05 had a criminal background check on 1-27-05 and an abuse check on the day of hire on 2-1-05. According to the manager this employee started at 8:00 am and the fax was returned to the program regarding the abuse check at 14:22 pm. Another employee hired on 10-20-04 had a criminal background check on 10-21-04 and an abuse check on 10-25-04. The third employee hired on 1-28-04 had a criminal check on 1-22-04 and an abuse check was on 6-21-04.

- Regulatory Insufficiency: The program did not have complete background checks done on all employees prior to hire.

Dated this 4rd day of May, 2005.

WILLOW POINTE ASSISTED LIVING

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Willow Pointe Assisted Living

Written Response / Plan of Correction
May 9, 2005

A. 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)
  - ✓ Regulatory Insufficiency: The program did not appropriately document reviews including new physician orders with written documentation of time, date and signature.

Correction: Effective immediately, the ALP will properly document reviews including new physicians' orders, with written documentation of time, date and signature.

B. Transportation

- When the program provides transportation services directly or under contract with the program, the services shall be provided as required. (321 IAC 25.38)

  Regulatory Insufficiency: The program did not have employees appropriately licensed as required for the vehicle being used for the transportation of tenants.

Correction: By June 30, 2005, the Manager, Director of Tenant Services and Activity Coordinator will be properly licensed as CDL with passenger endorsement. The ALP maintenance supervisor is currently properly licensed.

C. Record Checks

The program conducts applicable employee record checks. (Iowa Code section 135C.33(5))

Regulatory Insufficiency: The program did not have complete background checks done on all employees prior to hire.

Correction: Effective immediately, the ALP will complete the criminal history background and dependent adult abuse checks prior to date of hire for all new employees.

Respectfully Submitted,

Rick Burke, LBSW
Manager

Erin Henry, RN
Erin Henry, R.N.
Director of Tenant Services