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

Assisted Living Program: **Complaint Intake #: 12230**

Barb Bowden, Director
Arlington Place of Oelwein
1101 3rd St SW
Oelwein, IA 50662

Date of Investigation:

May 9, 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 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 Arlington Place on May 9, 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:	20
Current number of tenants with cognitive disorder:	9
Total Population:	29

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

Accreditation Status –Not applicable.

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

Complaint Investigation – The complaint investigator(s) made the observations detailed in the following areas.

A. 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)]

Complaint Allegation: It was alleged the program did not appropriately assess tenants.

- Monitoring Observation: Tenant #1, admitted on 08/10/03, had a functional and health assessment dated 8-9-03 and a cognitive evaluation completed on 8-8-03. No new assessments could be found for this tenant. Tenant #2, admitted 01/31/03, had annual functional, cognitive and health evaluations dated 1-29-04 and scored a four on the GDS on 1-31-04. No new evaluations could be found for this tenant. Tenant #3 was admitted on 5-3-05 and did not have a health evaluation completed prior to taking occupancy.

- Regulatory Insufficiency: The program did not evaluate each tenant's functional and cognitive abilities and health status prior to taking occupancy, within 30 days, annually and as needed with a change in condition.

B. Criteria for exclusion of tenants - Program does not admit or retain tenants that require a higher level of care, unless a written exception has been applied for and approved. [321 IAC 25.23(3); 25.24]

Complaint Allegation: It was alleged the program retained tenants beyond an appropriate level of care.

- Monitoring Observation: Tenant #1 was admitted on 8-10-03 with diagnoses of Dementia, Parkinson's disease, Osteoporosis, Hypertension and low back pain. The tenant's functional and cognitive abilities and health status were updated 8-03 and the tenant was evaluated as a three on the Global Deterioration Scale. These were the most current evaluations that could be found for this tenant. Staff interviews indicated the tenant was very confused, was often incontinent of bladder, pushed the emergency response pendant between four and six times per shift and had frequent falls. The RN indicated the tenant fell approximately one time per week and program records show that the tenant fell or was found on the floor four times between 3-3-05 and 4-28-05. The tenant had minor injuries including red marks, a bleeding thumb, and bruising. Staff interviews indicated the tenant was toileted every two hours and was still frequently wet between the toileting intervals. Staff indicated this tenant required assistance with dressing, grooming, bathing, toileting and medications. Communication notes state that on 4-22-05 the tenant woke up every hour until 6:00 a.m. screaming that something was biting the tenant's neck. On 5-8-05 communication notes stated this tenant was on a "rampage" and staff was in this tenant's room five times for toileting. The tenant was found trying to strip off the tenant's own clothes at 1:45 p.m. and was very confused. Staff indicated when the tenant was on a "rampage" it was not physical or verbal aggression; however, the tenant was extremely agitated.

  Tenant #2 was admitted on 1-31-03 and had diagnoses of Hypertension, Osteoarthritis, and a past neck injury from a car accident. Tenant #2 had an annual

functional, cognitive and health evaluation dated 1-29-04 and scored a four on the GDS on 1-31-04. No current evaluations could be found. Staff stated this tenant was frequently incontinent of bladder, one time per shift despite two-hour toileting, and also incontinent of bowel. The RN indicated the tenant was wet half the time between the toileting intervals and bowel incontinent two times a week. The RN indicated the tenant refused toileting assistance throughout the night. In communication notes dated 4-2-05 it was reported the tenant was found "bottomless" on the couch and had been bowel incontinent. The RN and staff members reported the tenant does not know when the tenant was having a bowel movement. Staff reported the tenant required assistance with dressing/undressing, toileting, bathing, and medications. Staff also state this tenant had experienced recent choking episodes in the dining room because the tenant eats too fast.

Tenant #3 was admitted on 5-3-05 with diagnoses of Congestive Heart Failure, Atrial-fib, Hypertension, Osteoporosis, and Dementia. The tenant scored a 2.4 on the Brief Cognitive Rating Scale (BCRS) upon admission. The RN stated in an interview she was not aware the tenant was an elopement risk but was aware the tenant often refused medications. Between 5-7-05 and 5-8-05 the tenant successfully eloped several times. A staff member called the police on 5-7-05 to redirect the tenant back to the building after several failed attempts on their part. On 5-8-05 the tenant's family arrived and took the tenant to Mercy Plus.

- Regulatory Insufficiency: The program did not initiate transfer for tenants who on a routine basis have unmanageable incontinence or are dangerous to self.

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

- Monitoring Observation: During the course of the complaint investigation the following information was obtained. Tenant #1 was admitted on 8-10-03 and had a service plan dated 8-8-03, which was signed by the registered nurse (RN) and the tenant. The RN, on 8-9-03, 6-6-04, 12-9-04 and 1-10-05, updated the service plan. The tenant, who required personal and health related cares, had only signed the service plan developed prior to occupancy. Tenant #3 was admitted on 5-3-05 and had a service plan dated 4-28-05, which was signed by the RN but not by the tenant.

- Regulatory Insufficiency: The program did not have appropriately signed service plans.

D. Staffing - The provisions of this section address the program's staffing and training practices and associated documentation in responding to the identified needs of the tenant. [321 IAC 25.33]

Complaint Allegation: It was alleged the program did not have adequate supervision of tenants.

- Monitoring Observation: At the time of the investigation there were 29 tenants with five currently hospitalized. According to staff interviews three tenants out of 29 self-administered medications. One staff member worked on each shift and the building was staffed 24 hours a day. All staff members and the RN that were interviewed indicated this was not enough staff to take care of the tenants. Tenants stated they were fairly independent and felt their needs were being met; however, they felt more staff were needed to take care of those with a higher level of care. Staff members stated they were concerned that when giving showers to tenants they were not able to answer other tenants pendant calls because they could not leave the tenant in the shower unattended. Staff indicated several of the tenants experienced sun downing behaviors; including, increased anxiety and agitation, which added to the level of care needs and demands of the tenants. Tenant #1 used the emergency response pendant approximately four to six times per shift and was often incontinent which required extended staff time to manage. On 5-7-05 Tenant #2 eloped from the building and staff could not reach the 24-hour on call RN. Program records show on 5-2-05 a staff member could not find the medication planner for a tenant that had medications set up by a family member and attempted unsuccessfully to contact the RN. The staff member administered medications according to the medication sheet. One staff member stated the RN was not accessible at all times and stated it was difficult to reach the RN when needed. On the day of the investigation the monitor arrived at 8:00 am and the RN was unable to be contacted via cell phone or home phone, arriving approximately four hours later. Tenant #3 was admitted on 5-3-05 and eloped several times from 5-7-05 through 5-8-05. When this tenant eloped on 5-7-05 a staff member attempted to redirect and bring the tenant back and in doing so the building was left unattended for approximately 45 minutes.

- Regulatory Insufficiency: The program did not have enough staff to sufficiently meet the needs of the tenants.

Dated this 13th day of May 2005