

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

Assisted Living Program:

Ms. Karen Vroman, Administrator
Gabus Home at Ramsey Village
1611 27 Street
Des Moines IA 50310

Date of Monitoring Visit:

May 25, 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 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 Gabus Home at Ramsey Village on May 25, 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: 10

Total Population: 10

Tenant/Family Satisfaction Results – No community meeting was held during this on-site investigation due to the moderate or severe dementia of tenants. Tenant observations were conducted and one tenant was interviewed. Tenants were observed in an activity and appeared to be dressed appropriately, well groomed and in good spirits. One tenant, who was interviewed, reported staff keeps the tenant's apartment clean and neat, always knocks before entering her room, has the privacy, and feels safe. The tenant stated staff are respectful and patient. The tenant's son visits weekly and the program informs him of the care the tenant receives.

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. 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: Two of four tenant files reviewed indicated a family member other than a legal representative signed the occupancy agreement in lieu of the tenant, and did so after tenant took occupancy. The program nurse stated tenants were not able to sign the occupancy agreement due to their diagnosis and severity of dementia.

- Regulatory Insufficiency: The program did not have the tenant or the tenant's legal representative sign the occupancy agreement prior to the tenant 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: Four of four tenant files reviewed indicated the program did not complete a functional or cognitive evaluation prior to occupancy or did not evaluate the tenant's functional, cognitive ability and health status within 30 days of occupancy.

- Regulatory Insufficiency: The program did not consistently evaluate tenant's functional, cognitive, and health status prior to and within 30 days of occupancy.

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

Monitoring Observation: Three of four tenant files reviewed indicated the program completed service plans after the tenant took occupancy. Four of four tenant files reviewed indicated only two staff had signed updated service plans within 30 days of occupancy.

- Regulatory Insufficiency: The program did not have the required three staff signatures indicating involvement in the development of each tenant's updated service plan for tenants needing personal or health-related care.

Dated this 31st day of May, 2005



HEALTH FACILITIES
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PLAN OF CORRECTION ASSISTED LIVING - GABUS HOME

A. 321 IAC 25.22 Occupancy Agreement

Correction: Reviewed chapter 25.22 Occupancy Agreement with Admissions and Marketing Director. Stating that prior to tenant's taking occupancy, the tenant or tenant's legal representative and program shall enter into an occupancy agreement.

Added statement to physical and history form: "Is tenant able to make medical decisions for herself/himself?"

Correction completed May 27, 2005.

System: All occupancy agreements will be signed by tenant or tenant's legal representative prior to tenant taking occupancy.

Monitor: The Executive Director will randomly check occupancy agreements for signature and date on new admissions.

B. 321 IAC 25.23 (1) and/or (2)

Correction: Tenant's functional, cognitive, and health statuses will be evaluated prior to and within thirty (30) days of occupancy.

Tenant's evaluation will be maintained in tenant's file.

Completed June 1, 2005.

System: Nurse representative, Social Worker, and Activity Director will do assessments and, with the tenant or tenant's legal representative, update service plan prior to and with thirty (30) days of occupancy. All will sign.

Monitor: Director of Nursing will monitor for compliance.

Karen Vroman
6-3-05

BROOKDALE
RAMSEY VILLAGE

C. 321 IAC 25.28 Service Plan

Correction: Tenant service plans were reviewed and the Activity Director will sign the updated service plan along with the nurse representative, Social Worker, and tenant and/or the tenant's legal representative.

Reviewed 25.28 Service Plan with multidisciplinary team.

Corrected June 2, 2005.

System: Three (3) staff will sign the updated service plan for tenants needing personal or health-related care.

Monitor: The Social Worker will review tenant service plan to make sure all those involved in the plan have signed the plan.

Karen Vroman
6-3-05