Iowa Department of Inspections and Appeals
Assisted Living Program
Recertification Monitoring Evaluation Report

Assisted Living Program:

Ms. Debbie Logan, LBSW Administrator
Holy Spirit Assisted Living
Holy Spirit for Dementia Assisted Living
1705 & 1707 W. 25th Street
Sioux City, IA 51103

Date of Monitoring Visit:

January 19, 2006

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 Recertification Monitoring Evaluation Report. Depending on the circumstances, DIA may revisit 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 Holy Spirit Assisted Living on January 19, 2006. 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:	2

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:	12
Total Population:	34

***These are the census numbers represented by the program to be applicable.**

Tenant/Family Satisfaction Results – A community meeting was held with 12 tenants in attendance. Tenants report the program staff keep their apartments clean and the building and grounds are well kept. Tenants report they are encouraged to maintain their independence. Tenants state the food is good but wished there were more fresh fruit and vegetables. One tenant requested the program offer more salads. Tenants report the nurse is always available and willing to help when needed. Tenants report staff are well-trained and are "always willing to help." Tenants state they would recommend this program to friends and family.

Complaint History – There are no complaints this certification period.

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

A. 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 12 p.m. medication administration, the monitor observed staff administering medications to several tenants; however, the staff person did not wash her hands before administering medication to the next tenant.

- Regulatory Insufficiency: The program does not administer medications to tenants according to accepted medication protocol.

B. 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 of four tenant files reviewed indicate the program nurse signs and dates physician and other health care orders, but does not time these orders indicating the orders were appropriately acted upon.

- Regulatory Insufficiency: The program nurse does not time orders received as required under state regulation.

Dated this 24th day of January, 2006.