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

Assisted Living Program: **Complaint Intake #**: 12726-R

Mike Isaacson, Director
Bickford Cottage Assisted Living
5101 University Avenue
Cedar Falls, IA 50613

Date of Investigation:

April 4, 2006

Monitor(s):

Hal Chase, RN BSN MPH
Stephanie Cummins, SW MA
Ann Martin, RN

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 Bickford Cottage Assisted Living on April 4, 2006. 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 serves 5 or more tenants with dementia or cognitive disorder staged between 4 and 7 on the Global Deterioration Scale (GDS):	11
Current number of tenants without cognitive disorder:	23
Total Population:	34

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

Accreditation Status – Not applicable.

Complaint History – There were substantiated complaints this certification period regarding Occupancy Agreement, Medications, Occupancy and Transfer Criteria, Exclusion of Tenants, Service Plan and Staffing.

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)]

- Monitoring Observation: The program received an insufficiency related to evaluations as a result of the complaint investigation conducted on 2-20-06.

  Eight tenant files were reviewed, three of eight were new admissions and one tenant required evaluations with a change in status. The cognitive, health and functional evaluations were completed appropriately.

- Regulatory Insufficiency: None noted.

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]

- Monitoring Observation: The program received an insufficiency related to criteria for exclusion of tenants as a result of the complaint investigation conducted on 2-20-06.

  Tenant #1, a 69 year old, admitted on 11-30-03 with diagnoses of Supra Nuclear Palsy, Status Post Head Injury with Evacuation of Subdural Hematoma, Osteoarthritis, and Dysathria. The tenant has been involved in a Hospice program for 13 months, and is currently on a State approved waiver. Hourly checks were conducted by the monitor from 10 a.m. to 4 p.m., to determine appropriateness of service delivery. A communication book had been kept in the tenant's apartment, which described the detail of care delivered at hourly intervals. Thickened water is offered by program and hospice staff at hourly intervals while the tenant is upright in the chair. Malts are offered two to three times per day by program staff. The tenant is fed breakfast by Hospice staff Monday through Friday and lunch Monday through Sunday. Hired private caregivers feed the tenant supper Monday through Friday. The tenant communicates by movement of right hand in response to questions regarding needs. Voiding and defecation records in the bathroom were examined by the nurse. The tenant remains continent of urine and bowel with adequate nursing support. Pain management is adequate, following application of Duragesic Patch in March, and numerous adjuncts for pain control. All caregiving staff interviewed understands the tenant's nonverbal care needs. Tenant is appropriately repositioned at the direction of the nurse.

- Regulatory Insufficiency: None noted.

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

- Monitoring Observation: The program received an insufficiency related to service plans as a result of the complaint investigation conducted on 2-20-06.

  Eight tenant files were reviewed. Two tenants had service plans that did not reflect their current needs. Tenant #1 requires the assist of two for transfer related to safety. The most current service plan dated 2-20-06 under mobility states the tenant is a one-person transfer on an intermittent basis.

  Tenant #2, an 89 year old, admitted on 1-22-05 with diagnoses of Senile Dementia, Hallucinations, History of Hypercholestremia and History of Constipation. The tenant was staged as six on the Global Deterioration Scale (GDS). The nursing evaluation dated 2-23-06 indicates the tenant has had frequent involuntary bowel movements. Nurse's notes 1-20-06 through 2-22-06 indicate the tenant has had bowel movement incontinence, including stool in wastebasket, floor, sink, underclothing and hands. The most current service plan dated 3-6-06 indicates, under bowel management the tenant is "independent with bowel needs without verbal reminders to toilet" but, "on occasion…needs assistance such as verbal reminders to toilet."

- Regulatory Insufficiency: The program does not have service plans that reflect the current needs of tenants.

- Monitoring Observation: Eleven tenants have a GDS score of four and above (three have GDS scores of six). The service plans did not specify planned and spontaneous activities for these tenants. Leisure inventories had been collected on all tenants, which indicate suggestions for activities based upon tenants' abilities and personal interests. This information did not prompt specifics in activity programming.

- Regulatory Insufficiency: The program does not have specific planned and spontaneous activities in the service plans for tenants with dementing illness.

D. Activities – The program provides appropriate programming for tenants based on individual interests. Programming shall support the service plans, be consistent with the program statement and occupancy policies, and available in writing as required. [321 IAC 25.39]

- Monitoring Observation: The program received an insufficiency related to activities as a result of the complaint investigation conducted on 2-20-06.

  Eleven tenants have a GDS score of four and above (three have GDS scores of six). The activities intern indicates no input into the creation of tenants' service plans. Tenants that "cannot come out of their rooms" have no specific service planning. Service plans were not seen by the activities intern and tenants are said to need one on one activities.

- Regulatory Insufficiency: The program does not meet the specific needs of all tenants with dementing illness.

E. Assisted Living Definition – Program encourages family involvement, tenant self-direction, and tenant participation in decisions that emphasize choice, dignity, privacy, individuality, shared risk, and independence. [Iowa Code section 231C.2]

- Monitoring Observation: The program received an insufficiency related to this assisted living definition as a result of the complaint investigation conducted on 2-20-06.

  The monitors observation during the on-site investigation and review of eight tenant files suggest that the program promotes tenant self-direction, and tenant participation in decisions that emphasize choice, dignity, privacy, individuality, shared risk, and independence.

- Regulatory Insufficiency: None noted.

Dated this 28th day of April, 2006.