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

Assisted Living Program: **Complaint Intake #: 12791**

Jason Van Der Veer, Administrator
Maple Grove Assisted Living
1917 South 18th Street
Centerville, IA 52544

Date of Investigation:

March 31, 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 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 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 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 Maple Grove Assisted Living on March 31, 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:	15
Current number of tenants with cognitive disorder:	1
Total Population:	16

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

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

Accreditation Status – Not applicable.

Complaint History – There was a substantiated complaint in the area of Other (structural requirements) during this certification period.

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

A**. 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 is alleged the program is retaining a tenant who requires, at minimum, two persons to assist when the tenant falls.

- Monitoring Observation: Three of three tenant files, which included the tenant cited by the complainant, was reviewed and indicated the program did not retain a tenant who requires a higher level of care allowed by regulation. Tenant #1, an 80 year old, admitted to the program on 9/6/02, with diagnoses of Chronic Lymphedema, Osteoarthritis, Hypothyroidism, and Hypertension (HTN). The tenant's service plan of 7/29/05 identifies the tenant as independent with ambulation, but utilizes a walker for short distances and a wheelchair when outside his/her apartment. The tenant's file indicates one fall in the last three months. This fall occurred on 2/6/06 at or around 7:00 a.m. An incident report was filed, which indicated the tenant had fallen from his/her bed. The tenant had called for assistance and two staff assisted with transferring the tenant from the floor to a chair. No injuries were sustained and no other action was taken. There have been no other injuries of record in the last four months.

  An interview with three direct care staff and a review of the tenant's file indicated the tenant was independent for ambulation and does not need the assistance of one or two staff for ambulation or mobility. A monitor observed and spoke with the tenant, asking if the tenant had sustained a fall on 2/6/06 or at other times. The tenant stated he/she had fallen on 2/6/06, staff had responded quickly to the call for assistance, and he/she did not sustain any injuries related to the fall. The tenant stated being pleased with the response given by direct care staff.

  One staff person reported one additional tenant who had a number of falls in the past three months. Tenant #2, an 89 year old, admitted to the program on 4/14/03, with diagnoses of Osteoarthritis, Degenerative Arthritis, Spinal Stenosis, and a History of Glaucoma. A review of the tenant's file indicated a service plan of 6/17/05 identifies the tenant as needing assistance of one with transfers, and uses a wheelchair when outside the apartment; also the tenant had fallen twice on 1/6/06, once on 2/22/06, and again on 3/4/06 sustaining minor injuries with the falls. The program completed an incident report each time, and the nurse evaluated the tenant's status. The tenant stated he/she had called for assistance each time, and staff responded quickly to his/her satisfaction.

- Regulatory Insufficiency: None noted.

B. 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 is alleged the program does not have adequate staff to meet the needs of tenants.

- Monitoring Observation: Following a review of staff schedules, and subsequent interviews with leadership, staff, and tenant interviews, it was determined there is sufficient staff to meet the needs of tenants. The number of staff at the program hasn't changed, with two staff present from 6:30 a.m. until 3:00 p.m.; two staff from 3:00 p.m. until 7:30 p.m. and one staff person from 7:30 p.m. until 10:30 p.m. At 10:30 p.m. staff from the adjacent nursing facility respond to tenants calling for assistance. There has been a change in leadership staff at the program, and duties for certain staff members have changed. Staff giving personal cares previously, was given new duties and staff from the nursing facility was coming to the program to provide personal cares to tenants. Tenants interviewed indicate they are pleased with the care they receive and stated they were happy with the services and timeliness of care staff. Tenants stated staff responds within five to ten minutes when called for assistance.

- Regulatory Insufficiency: None noted.

Dated this 10th day of April, 2006