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

Assisted Living Program:

Calvin Community Assisted Living
Mr. Eldrid Kingery, Administrator
4210 Hickman Road
Des Moines IA 50310

Date of Monitoring Visit:

June 29, 2005

Monitor(s):

Hal L. Chase, RN BSN MPH
Charlotte Kemp, RN MSN

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 Calvin Community Assisted Living on July 29, 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:	76
Current number of tenants without cognitive disorder:	17
Total Population:	93

Tenant/Family Satisfaction Results – A community meeting was held with 41 tenants present. Tenants reported the program was well kept and staff were very attentive to their housekeeping duties, respected tenants privacy and knocked before entering their home. Tenants reported food is good and there are choices of entrees, but at times the food can be "extremely salty", and they "wished they had more fresh vegetables." Tenants reported staff welcomes family and visitors and encourages them to participate in activities and other events. Tenants reported staff are respectful and take time to listen to their concerns. Tenants reported they are receiving the services they expected and choose what services they want from the program. Tenants reported there are problems with the personal emergency response system, and it takes several minutes for staff to respond to their calls. Tenants stated the leadership staff is always available and pleasant.

Complaint History – There were substantiated complaints in the area of medications and nurse review.

On-Site Monitoring Evaluation – The monitor(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: Seven of seven files reviewed indicated the program did not consistently evaluate tenants within 30 days of admission to the program, when a tenants functional, cognitive and/or health status changed, and annually requiring the program to determine if any modifications to services are needed.

- Regulatory Insufficiency: The program did not evaluate each tenant's functional, cognitive and health status as needed to determine if any modifications in services were needed.

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: A review of two tenant files indicated Tenant #1 and Tenant #2 requires a higher level of care than the program can offer. Tenant #1 is an 84 year old female with a Global Deterioration Scale (GDS) of 5, has a diagnosis of Parkinson's, degenerative joint disease (DJD), peripheral neuropathy, depression, and suicidal threats. Tenant was evaluated nine days after being admitted to the program by the program's licensed independent social worker and determined the tenant's needs were "far beyond what is appropriate for assisted living", but stated the program would continue to assess. Progress notes indicated between 10/19/04 and 6/25/05 the tenant, despite interventions, had numerous falls, displayed behavior that was dangerous to self and others, and displayed unmanageable verbal abuse and aggression toward staff. Tenant #2 is a 97-year-old female with a current GDS of 6, with a diagnosis of Alzheimer's, Depression, and (HTN). Progress notes indicated between 1/6/05 and 6/11/05 Tenant #2, despite interventions, had numerous elopements from the program. Progress notes also indicated that the program needed to monitor the need for higher level of care.

- Regulatory Insufficiency: The program did not initiate transfer for Tenant #1 & 2 that require a higher level of care.

C. Tenant Documents – Program maintains a complete file for each tenant containing all appropriate documentation. [321 IAC 25.27]

Monitoring Observation: Seven of seven tenant files reviewed indicated the program did not consistently obtain tenant signatures on advanced directives but rather the tenant's family member.

Regulatory Insufficiency: The program did not obtain the tenant's signature on advanced directives.

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

Monitoring Observation: Seven of seven tenant files indicated the program did not consistently complete a service plan update within 30 days of admission to the program,

did not update the service plan when modifications in services were identified in the progress notes, did not consistently update service plans annually, and did not consistently collaborate with the tenant, their legal representative, and with three staff who provide direct care to tenant, as the required signatures were not obtained.

- Regulatory Insufficiency: The program did not update the service plan to reflect the needed services of tenant's.

E. 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: Seven of seven tenant files reviewed indicated the program did complete a medication review every 90 days; however, did not consistently assess and document the tenant's health related activities.

- Regulatory Insufficiency: The program did not complete a nurse review that encompassed an assessment of the tenant's health related activities.

Dated this 12th July, 2005