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

Assisted Living Program:

Mr. Gary Tiemeyer, Administrator
Heritage Court Assisted Living
1499 Office Park Road
West Des Moines, IA 50265

Date of Monitoring Visit:

November 2, 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 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 Heritage Court Assisted Living on November 2, 2005. 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:	24
Current number of tenants with cognitive disorder:	3
Total Population:	27

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

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

Tenant/Family Satisfaction Results – A community meeting was held with 22 tenants and two families were interviewed. Tenants and families state the building is clean and well maintained. Tenants state the food is good and are given choices of entrées when asked. Tenants enjoy the activities offered. Tenants and families state the direct care staff is friendly, supportive, caring, and well trained. Tenants report they never have to wait long when staff is called. Tenants feel safe and would recommend the program to friends and family.

Complaint History – There are no substantiated complaints during this certification period.

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: Two of four tenant files reviewed indicate the program does not evaluate tenants' functional, health, and cognitive status within 30 days of admission. Four of four tenant files reviewed indicate the program does not evaluate tenants functional, health, and cognition when a change occurred in the tenants' status.

- Regulatory Insufficiency: The program does not consistently evaluate tenants within 30 days of admission and with the status change and requiring a change in services.

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

Monitoring Observation: Four of four tenant files reviewed indicate the program made changes in the tenants' service plans, but did not consult with tenants or with a multi-disciplinary team. This is evidenced by the lack of signatures of tenant and staff.

- Regulatory Insufficiency: The program does not develop service plans in consultation with tenants and a multi-disciplinary team that consists of no fewer than three individuals including a health-care professional and other staff appropriate to meet the needs of the tenant.

Dated this 10th day of November, 2005