

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

Assisted Living Program:

Complaint Intake #: 12675

Ms. Jeanine Chartier, Administrator
Char-Mac of Holstein Assisted Living
1500 South Kiel Street
Holstein, IA 51025

Date of Investigation:

January 18, 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 Char-Mac of Holstein Assisted Living on January 18, 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: 14

Current number of tenants with cognitive disorder: 0

Total Population: 14

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 are no substantiated complaints 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 retained a tenant that requires a higher level of care than the program can provide under state regulation. This investigation was completed during the program's initial certification visit.

- Monitoring Observation: Tenant #1 is 70 years old with diagnoses of Congestive Heart Failure, History of Seizures, Hypertension, and a Right Wrist Fracture. The tenant was admitted to the program on 1/5/2006. An evaluation was completed prior to admission to the program and within 30 days of admission indicating the tenant was appropriate to be admitted to the program. The tenant passed a mini mental status exam (MMSE) which was administered by the program prior to admission and was reviewed again within 30 days of admission with no changes noted. The tenant's initial service plan and subsequent 30 day service plan indicates the tenant is independent with the majority of activities of daily living (ADL's), but requests occasional assistance with transfer and assistance with bathing due to the broken wrist. The tenant also requested the program to administer medications. The initial and 30 day service plans indicate no change in the tenant's status. Staff interviewed report the tenant is appropriate and independent with the majority of ADL's, but tenant does require some assistance with bathing and transferring due to a broken wrist.
- Regulatory Insufficiency: None noted.

Dated this 24th day of January, 2006.