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

Assisted Living Program:

Ed Pousch, Administrator
Mayflower Homes
616 Broad St.
Grinnell, IA 50112

Date of Monitoring Visit:

February 17, 2006

Monitor(s):

Jan O'Briant, LISW

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 Mayflower Homes on February 17, 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:	9
Current number of tenants with cognitive disorder:	1
Total Population:	10

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

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

Tenant/Family Satisfaction Results – Five tenants attended the community meeting, two tenants and one family interview were conducted. Tenants were complimentary of the staff and the services provided. Family stated she is very satisfied with the services, activities and attention given by staff to her family member who is "thriving here." One tenant who is new to the program, reports he/she is "settling in nicely." Tenants reported they believe autonomy and independence are supported and they are treated with dignity and respect. One tenant reports that "life just gets better and better the longer I'm here."

Complaint History – There were no substantiated complaints during this recertification period.

On-Site Monitoring Evaluation – The monitor(s) made the observations detailed in the following areas.

A. 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: Two tenant files were reviewed and contained the appropriate documentation of medications, ninety day reviews of health status, and monthly reviews of medications. These required elements were completed either by an LPN and co-signed by the program RN or were completed by the program RN. Physician orders were notated in the files with signature and date but on several occasions, the time of the notation was missing.

- Regulatory Insufficiency: The program did not properly notate physician orders with time.

Dated this 22nd day of February, 2006.