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

Assisted Living Program:

Leslie Nussle, Director
The Meadows Assisted Living
200 McCarren Drive
Manchester, IA 52057

Date of Monitoring Visit:

January 24, 2006

Monitor(s):

Stephanie Cummins, SW MA

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 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 The Meadows Assisted Living on January 24, 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:	29
Current number of tenants with cognitive disorder:	4
Total Population:	33

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 with 17 tenants, two tenant interviews and two family interviews was held. Tenants state it is a nice place to live and the building is kept clean. They indicate they have an activity every hour of the day if they chose to participate. Tenants state some of the activities they enjoy include: devotions, brain teasers, music and exercises. Tenants described staff as "accommodating" and family states they "do a lot of little extras." Tenants and family state the Director is approachable and indicate she gets back to the tenants/family with a solution or answer. Staff responds in less than three minutes if they need assistance. Tenants enjoy the salad bar and entrée choices offered at meals but state the evening meal is not as good as the noon meal. They report the vegetables and noodles are, at times, not cooked thoroughly at the evening meal. Tenant and family report they feel very fortunate to have such a nice place to live in their community.

Complaint History – No substantiated complaints 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: Three tenant files were reviewed. Two out of three files do not have a health evaluation completed prior to taking occupancy.

- Regulatory Insufficiency: The program does not complete health evaluations prior to taking occupancy.

Monitoring Observation: Three tenant files were reviewed. None of the three files have a functional evaluation completed within 30 days of taking occupancy.

- Regulatory Insufficiency: The program does not complete functional evaluations within 30 days of taking occupancy.

Monitoring Observation: Three tenant files were reviewed. The Registered Nurse (RN) indicated the health evaluation within 30 days consisted of a narrative on the service plan conference summary form. The following is an example of what the RN indicated was a health evaluation within 30 days: "Currently meds are set each week in a medi-planner by the nurse and staff administers the meds at proper time. …is adjusting to living well at the Meadows." The RN indicates a new health form was implemented in December of 2005. The new health evaluation addresses vitals, overall health condition, comments, ambulation status, evacuation status and medication review.

- Regulatory Insufficiency: The program does not complete a comprehensive health evaluation within 30 days of taking occupancy.

B. 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: Three tenant files were reviewed. None of the three files have physician orders documented with time.

- Regulatory Insufficiency: The program does not appropriately document physician orders.

C. 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]

Monitoring Observation: Three employee files were reviewed. One of the three files did not have proof of Mandatory Dependent Adult Abuse Reporting training. The Director provided a written statement, which stated the employee was a college student hired in August of 2004. The employee did not work on a regular basis and was not available when past trainings have occurred. The employee worked a short amount of time the summer of 2004 and 2005 doing deep cleaning. The employee returned to work over the

holiday season this year and plans to work through February doing personal cares and medications.

- Regulatory Insufficiency: The program does not have proof of Mandatory Dependent Adult Abuse Reporting training for all employees.

Dated this 1st day of February 2006.