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

Assisted Living Program:

Shelley Wicks, Administrator
Leland Smith Assisted Living
309 Ovesen Drive
Wilton, IA 52778

Date of Monitoring Visit:

February 7, 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 Leland Smith Assisted Living on February 7, 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:	12
Current number of tenants with cognitive disorder:	2
Total Population:	14

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 seven tenants, two family interviews and two tenant interviews were held. Tenants report the food is "excellent" and several tenants state the food is a great benefit of living there. Tenants feel they make decisions regarding their daily life and routines and they report staff is kind and they appreciate the good care they receive. Tenants enjoy bingo, numerous groups of children that visit from local schools, exercises and worship services. A few of the tenants would like to start a group that plays card games including Euchre and 500. Tenants state they enjoy not having to clear sidewalks and maintain yards and they feel safe in their new home. A family member suggested the program provide a monthly newsletter to keep families informed. A tenant suggested new tenants and staff get introduced to all of the tenants and commented that communication between staff, tenants and the nurse could be improved.

Complaint History – There were 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. None of the files have a cognitive or functional evaluation within 30 days of taking occupancy.

- Regulatory Insufficiency: The program does not evaluate tenants' cognitive and functional abilities within 30 days of taking occupancy.

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

Monitoring Observation: Three tenant files were reviewed. Two of three tenant files have service plans signed by the Registered Nurse (RN), one staff member and the tenant or tenant's legal representative. The tenants both receive personal and/or health related care.

- Regulatory Insufficiency: The program does not have service plans signed by a health professional, two staff and the tenant and/or the tenant's legal representative.

Monitoring Observation: Two tenants have diagnoses of dementia and scored a four or above on the Global Deterioration Scale (GDS). The service plans do not address planned or spontaneous activities. The service plan for one tenant under activities states, activities of choice and invite/encourage to participate as the tenant allows. The service plan for the other tenant states, staff will assist with re-orientation to current events through memory board, calendar, conversation and activities on a daily basis and the tenant to attend activities of choice.

- Regulatory Insufficiency: The program does not have service plans that address planned and spontaneous activities based on the tenants' abilities and personal interests for those unable to plan their own activities.

C. 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: A review of medications is completed every 90 days; however, the review is not comprehensive. An example of a medication review found in the nurse's notes states, "Meds are administered by staff and obtained from …Pharmacy." The 90-day medication reviews do not address efficacy of the medications, interventions, new orders and referrals.

- Regulatory Insufficiency: The program does not complete a comprehensive review of medications every 90 days for those tenants that receive program administered medications.

D. Transportation – When the program provides transportation services directly or under contract with the program, the services shall be provided as required. [321 IAC 25.38]

Monitoring Observation: The program has a sedan that is used to transport tenants to physician appointments or on local shopping trips. The RN drives the vehicle when transporting tenants and has a regular State of Iowa Drivers License. A review of the vehicle indicates the vehicle does not have any of the required safety equipment.

- Regulatory Insufficiency: The program does not have an appropriately licensed driver who holds a Chauffeurs Class D license with a three endorsement.

- Regulatory Insufficiency: The program does not have a vehicle with the required safety equipment including a first aid kit, fire extinguisher and safety triangles.

Dated this 13th day of February 2006.