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

Assisted Living Program: **Complaint Intake #: 10678**

Malissa Sherod, Administrator
3801 Grand
3801 Grand Ave.
Des Moines, Iowa 50312

Date of Investigation:

February 21, 2007

Monitor(s):

Mary Oliver, 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 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 3801 Grand on February 21, 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:	41
Current number of tenants with cognitive disorder:	12
Total Population:	53

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

***These are the census numbers represented by the program to be applicable at the time of the on-site.**

Accreditation Status – Not applicable.

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

Complaint Investigation – The complaint investigator(s) made the observations detailed in the following areas.

A. Medications – Program has a comprehensive written medication policy that allows tenant self-administration, but accommodates the need for tenant medication assistance via nurse delegation. The medication assistance is appropriately supervised and administered. Medications are appropriately stored. [231C.16A]

Complaint Allegation: It was alleged that Tenant #1 was given a specific medication for months after it was discontinued by the physician in February, 2006.

- Monitoring Observation: Tenant #1, a 75 year old, was admitted on 9-5-03 with a diagnosis of Major Depressive Disorder. Review of physician orders and medication administration records indicate the medication Norvasc was administered only from 9-8-06 through 9-18-06 with a medication order in place.

- Regulatory Insufficiency: None noted.

B. Food Service – Program shall provide or coordinate with other community providers to provide hot or other appropriate meal(s) at least once a day or make arrangements for the availability of meals. Menus shall be appropriately planned. If applicable, therapeutic diets shall meet all requirements. Food preparation personnel shall meet all requirements. [321 IAC 25.32]

Complaint Allegation: It is alleged a staff person comes to work drunk, drinks at work, watches TV instead of working, burns food and does not get meals out on time.

- Monitoring Observation: Interviews with administration and tenants, and review of a personnel file, show the program had a problem with one employee related to use of alcohol; however, the employee was not drinking while working. The program took disciplinary action and is monitoring the employee closely.

  A review of the tenant council meeting minutes indicated the program had problems with quality and timeliness of meals. The program has addressed these problems. Tenants interviewed in a group and individually made numerous positive comments about the improvements in the quality of food. One employee interviewed noted a new Dietary Manager was hired recently and food service improved immediately. One employee file contained numerous notes written in February 2007, complimenting one employee on the quality of food served.

- Regulatory Insufficiency: None noted.

Dated this 8th day of March, 2007.