# Iowa Department of Inspections and Appeals
# Assisted Living Program
# Initial Certification & Complaint Investigation Report - Second Revisit

**Assisted Living Program:**

Ms. Jean Parrish, Administrator
Prime Living Apartments Assisted Living
725 Pearl Street
Sioux City, IA 51103-1014

**Complaint Intake:** **#11647R**
**#11885-2R**
**#11913-2R**

**Date of Monitoring Visit:**

June 7, 2007

**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 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 an Initial Certification 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 initial on-site monitoring evaluation, a complaint investigation revisit to #11647 and second complaint investigation revisits to #11885 and #11913 were conducted at Prime Living Apartments Assisted Living on June 7, 2007. 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: | 35 |
| Current number of tenants with cognitive disorder: | 0 |
| Total Population: | 35 |

***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.**

**Tenant/Family Satisfaction Results** – A community meeting was held with thirty-one tenants. Tenants state housekeeping is doing a better job than before in keeping their apartments clean. Staff is better than before but tenants still pay too much money for the emergency response pendants. While the food is better, tenants don't understand why the prices continue to go up. Activities are also getting better but more activities are needed. Tenants state they feel safe, are getting the services they expect and make their own decisions. Tenants are satisfied with the services they receive and would recommend the program to friends and family.

**Complaint History** – There were substantiated complaints in the areas of Service Plan, Medications, Nurse Review, Food Service, Staffing and Activities.

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

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

During the course of the last complaint investigation of 4-25-07, the program received a regulatory insufficiency related to not having a multi-disciplinary team of three sign the service plan.

Monitoring Observation: Five tenant files reviewed indicate service plans were updated and signed by a multidisciplinary team of three.

- Regulatory Insufficiency: None noted.

**B. 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 #11913: The program received two regulatory insufficiencies related to not documenting medications given by the program, for not giving an explanation if medications were not administered and for not applying an acceptable standard of practice by not following a physician's instructions when administering medications. A revisit was made on 5-15-07, with the program receiving a regulatory insufficiency for not documenting medications given by the program and for not giving an explanation if medications were not administered.

Monitoring Observation: A review of June 2007 Medication Administration Records for all tenants receiving medications from the program, indicates the program consistently documents medications given, gives an explanation for medications not given and applies an acceptable standard of practice of following physician's instructions when administering medications.

- Regulatory Insufficiency: None noted.

Complaint Allegation #11913: The program received a regulatory insufficiency for not administering medications according to applicable medication administration standards.

Monitoring Observation: The monitor observed staff administer medications to tenants within applied standards of medication administration.

- Regulatory Insufficiency: None noted.

During the course of the last complaint investigation on 4-25-07, the program received a regulatory insufficiency related to not administering Accu-checks and oral medications within an applied standard of practice.

Monitoring Observation: The monitor observed staff administer Accu-checks and oral medications to tenants within applied standards of medication administration.

- Regulatory Insufficiency: None noted.

Complaint Allegation #11913: The program received a regulatory insufficiency related to inadequate training and not demonstrating competency in medication administration.

Monitoring Observation: A review of staff files and interviews indicate the program re-trained staff in medication administration with each staff demonstrating competency to the Registered Nurse (RN) before administering medications independently.

- Regulatory Insufficiency: None noted.

**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]

During the course of the last complaint investigation of 4-25-07, the program received a regulatory insufficiency related to not completing a nurse review of tenants receiving medication administration and health and personal cares.

Monitoring Observation: Five tenant files reviewed indicate the program completes a nurse review every 90 days or when a change in condition exists. The administrator provided a letter from a local pharmacy, indicating the pharmacy would review program-administered medications for adverse reactions and would establish appropriate interventions or referral.

- Regulatory Insufficiency: None noted.

**D. 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]

During the course of the last complaint investigation of 4-25-07, the program received a regulatory insufficiency related to not having adequately trained staff for the preparation and serving of food and no orientation on sanitation and safe food handling.

Monitoring Observation: The administrator provided documentation that the cook is currently taking the Serv-Safe course for the preparation and serving of food in order to orient staff on sanitation and safe food handling.

- Regulatory Insufficiency: None noted.

**E. 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]

Complaint Allegation #11647 & 11913: The program received two regulatory insufficiencies related to not having sufficiently trained staff available at all times to fully meet the identified needs of tenants and the owner not ensuring all personnel received appropriate training.

Monitoring Observation: Four of five tenants state their needs were identified in their service plans and were being met by the program. One tenant states his/her garbage container is not always put back into his/her apartment as requested. Three staff state there is sufficient staff to meet the needs of tenants. The administrator states a housekeeper has been hired to clean each tenant apartment.

- Regulatory Insufficiency: None noted.

**F. Activities –** The program provides appropriate programming for tenants based on individual interests. Programming shall support the service plans, be consistent with the program statement and occupancy policies, and available in writing as required. [321 IAC 25.39]

Complaint Allegation #11647 & 11885: The program received a regulatory insufficiency related to not providing activities to meet the interests of tenants and not having a written monthly schedule of activities.

Monitoring Observation: The administrator stated the program has a dedicated activities person working 32 hours weekly. The activities person stated she works 32 hours weekly on activities and prepares and publishes a monthly calendar of activities. Five tenants state there are more activities that meet their interests.

- Regulatory Insufficiency: None noted.

Dated this 18th day of June 2007.