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

Assisted Living Program:

Gary Shebeck, Administrator
Newton Village Assisted Living
110 N 5Th Ave W
Newton, IA 50208-3186

Date of Monitoring Visit:

September 19, 2007

Monitor(s):

Hal L. Chase, RN BSN MPH
Lincoln Newsom, RN

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 Newton Village Assisted Living on September 19, 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:	38
Current number of tenants with cognitive disorder:	4

Dementia Specific Program (DSP)* – A program that is a Dementia Specific Program by definition or holds itself out as providing specialized care in a dedicated setting but may have tenants without cognitive disorder.

Current number of tenants in a DSP that holds itself out as providing specialized care in a dedicated setting:	4
Current number of tenants without cognitive disorder:	2
Total Population:	48

***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 23 tenants in attendance. Tenants expressed overall satisfaction with the program. Tenants stated the food was good with plenty offered. Tenants stated they wished the program could lower its' price, but this would probably mean less staff. Tenants stated there are lots of choices offered when it came to activities. Tenants stated they felt safe and received the services they expected, they make their own decisions, are generally satisfied with the program and would recommend the program to friends and family

Complaint History – There were substantiated complaints during this certification period regarding medications, nurse review and staffing.

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: Tenant #2, an 80 year old, was admitted on 3-30-07 and has diagnoses of: Parkinson's, Coronary Artery Disease (CAD), Hypertension (HTN), Hypercholestremia and Arthritis. Nurse's progress notes of 4-30-07 through 9-3-07, indicated three incidents of being sexually inappropriate toward staff, and tenants with cognitive impairment. The program did not complete a functional, cognitive and health evaluation when a change in condition existed.

- Regulatory Insufficiency: The program did not complete a functional, cognitive and health evaluation to determine the tenant's continued eligibility for the program to determine any modifications to services needed. (25.23 (2))

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

Monitoring Observation: Tenant #2's service plan of 5-1-07 was not updated when a change in condition existed and did not indicate interventions related to incidents of sexual inappropriateness between 4-30-07 and 9-3-07.

Tenant #3, an 81 year old, was admitted on 8-31-07 and has diagnoses of: HTN, Hypercholestremia, CAD, and Prostate Carcinoma. Functional and health evaluations of 8-30-07 indicated the tenant needed assistance with medication reminders and use of a walker. The service plan of 8-31-07 did not include reminders for medications and use of a walker. The program did not develop a service plan to meet the specific service need of the tenant.

Tenant #5, an 83 year old was admitted on 11-14-05 and has diagnoses of: Cerebral Vascular Accident (CVA), Chronic Obstructive Pulmonary Disease (COPD), Hypothyroid, Arthritis, and Parkinson's. Resident notes of 7-24-07 indicated the tenant is to use a walker at all times and to use a portable oxygen tank. Nurse review of 8-8-07 indicated staff are to provide standby assist in hallways. The service plan of 11-27-06 indicated staff are to assist with wheelchair or walker to meals, but did not include use of walker, portable oxygen, and stand by assist in hallways. The program did not develop a service plan to meet the specific service need of the tenant.

Tenant #6, an 85 year old was admitted on 10-31-05 and has diagnoses of: Hypothyroidism, Anemia, Dementia, and Hiatal Hernia. Nurse progress notes of 7-11-07 indicated physical therapy was to start on 7-12-07. Nurse progress note on 7-12-07 indicated a cane was to be used for ambulation and a walker to be used for longer distances. Nurse progress notes of 8-30-07 indicated occupational therapy was to be done three times weekly. The service plan of 8-29-07 did not include the use of a cane, walker for longer distances, and did not include the update for physical or occupational therapy from 8-30-07. The program did not develop a service plan to meet the specific service need of the tenant.

- Regulatory Insufficiency: The program did not consistently update the tenants' service plan when a tenant needs personal care or health-related care within 30 days of occupancy, as needed. (25.28(3))

C. Dementia-specific education for program personnel – A dementia-specific program shall employ or contract with personnel who have received appropriate dementia-specific education and training. [321 IAC 25.34]

Monitoring Observation: A review of staff files indicated Staff #1 and #2 did not have six hours of dementia training within 90 days of employment.

- Regulatory Insufficiency: The program did not have all personnel employed by or contracting with a dementia-specific program receive a minimum of six hours of dementia-specific education training prior to or within 90 days of employment. (25.34(1))

D. Managed Risk Statement – Program has a managed risk statement which includes the tenant's or legal representative's signed acknowledgement of the shared responsibility for identifying and meeting needs and the process for managing risk and upholding tenant autonomy when tenant decision making may result in poor outcomes for the tenant or others. [321 IAC 25.36]

Monitoring Observation: Tenant #2's Mini Mental Examination of 4-30-07 indicated the tenant scored 27 out of 30, indicating no cognitive impairment. Nurse progress notes of 4-30-07 through 9-3-07 indicated three incidents of the tenant being sexually inappropriate toward staff, and tenants with cognitive impairment.

- Regulatory Insufficiency: The program did not have a managed risk statement for identifying and meeting the needs of the tenant and the process for managing risk when tenant decision making may result in poor outcomes. (25.36 (231C))

Dated this 28th day of September, 2007