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

Assisted Living Program:

Amy Pagel, Administrator
Traditions of West Union Assisted Living
609 Highway 150 N
West Union, IA 52175-1057

Date of Monitoring Visit:

March 19, 2008

Monitor(s):

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 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 on-site monitoring evaluation was conducted at Traditions of West Union Assisted Living on March 19, 2008. 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:	0

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:	0
Total Population:	16

***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 with five tenants was held. Tenants felt the program is doing a good job, the building is well maintained and staff is caring and friendly. Tenants state the food is good and there are choices; however, the food could be warmer, but it has improved over the last month. Tenants would like the Administrator to obtain a van for outings and a clock in the main part of the building. Activities have improved and tenants feel safe in the program. They believe they are getting what they are paying for and continue to make their own decisions. If there was an emergency, tenants said they would use the emergency response pull cord located in their rooms. The program would be recommended to family and friends.

Program History – There were no substantiated Regulatory Insufficiencies this certification period.

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]

Monitoring Observation: Tenant #1, a 91 year old, was admitted on 1-30-08 and had diagnoses of: Poor Memory, Urinary Incontinence and Hypertension (HTN). The tenant scored a four on the Global Deterioration Scale (GDS), indicating moderate cognitive decline. The program did not individualize the service plan and include planned and spontaneous activities based on the tenant's abilities and personal interests.

Tenant #2, a 94 year old, was admitted on 1-31-08 and had diagnoses of: Mild Dementia, Coronary Artery Disease (CAD), Diabetes Type 2, HTN and Anxiety. The tenant resides in the memory care unit and scored a five on the Global Deterioration Scale, indicating moderately severe cognitive decline. The program did not individualize the service plan and include planned and spontaneous activities based on the tenant's abilities and personal interests.

Tenant #3, a 70 year old, was admitted on 1-14-08 and had a diagnosis of Alzheimer's. The tenant resides in the memory care unit and scored a six on the Global Deterioration Scale, indicating severe cognitive decline. The program did not individualize the service plan and include planned and spontaneous activities based on the tenant's abilities and personal interests.

- Regulatory Insufficiency: : The program did not individualize the service plan and indicate, at a minimum for tenant's who are unable to plan their own activities, including tenants with dementia, planned and spontaneous activities based on the tenant's abilities and personal interests. (25.28(4)d)

Dated this 15th day of April, 2008.