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

Assisted Living Program:

Melissa Sherod, Administrator
3801 Grand Assisted Living
3801 Grand Ave.
Des Moines, IA 50312

Date of Monitoring Visit:

May 14, 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 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 3801 Grand Assisted Living on May 14, 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:	43
Current number of tenants with cognitive disorder:	13
Total Population:	56

***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 9 tenants. Tenants' stated the program is kept clean. Staff are great, but at times there is a language barrier between staff and tenants. Food is good most of the time; however, sometimes it is over cooked or undercooked and frequently not hot enough. The plate warmer is not working. Activities are good and the majority feels safe in the program. Tenants feel they are getting the services they are paying for. Tenants continue to make their own daily decisions. If there were an emergency, tenants use the emergency pull cords located in their rooms. Eight of the tenants stated they would recommend this program to others.

Program History – There were no substantiated regulatory insufficiencies during 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's service plan was updated on 4-28-08; however, it does not include the services of physical therapy (PT).

Tenant #3, had an annual service plan developed on 11-27-07; however, the service plan was not updated to include PT, which was provided from 1-4-08 through 2-4-08

- Regulatory Insufficiency: The program did not individualize the service plan and indicate, at a minimum, the service provider(s) if of other than the program. (25.28)(4)(c))

Dated this 16th day of June, 2008.

Plan of Correction
Recertification Survey
3801 Grand Assisted Living
Monitoring Visit May 14, 2008

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

1. **Elements detailing how the program will correct the insufficiency as it relates to the individual.**

The program now requires all outside providers to check in/out with the Nurse Manager or the Administrator The Nurse Manager in turn updates the service plan for the tenant(s) as to what the kind of outside provider (PT, OT, etc.) that is providing service to tenant(s).

2. **What actions the program will take to protect tenants in similar situations.**

The Nurse Manager will ensure that all tenants' service plans will reflect any service provided by any outside provider.

3. **What measures will be taken to ensure the problem does not recur.**

The Nurse Manager will take all measures to document any services provided by an outside provider on the tenant's service plan.

4. **How the program plans to monitor performance to ensure solutions are permanent.**

The Administrator will review tenants' service plans to make sure services provided by outside providers are properly documented.