IOWA DEPARTMENT OF

INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

May 29, 2008

Ed Poush, Administrator
Mayflower Homes
616 Broad St.
Grinnell, IA 50112-2298

RE: Recertification Monitoring Evaluation Report, Mayflower Homes, Grinnell, IA

Dear Mr. Poush:

The Department of Inspections and Appeals (DIA) has reviewed the Plan of Correction (POC) and your Request for Reconsideration in response to the **Recertification Monitoring Evaluation Report**.

Based on the information provided in the request for reconsideration, DIA accepts your request for Record Checks and denies the Request for Reconsideration as it relates to Staffing, and Food Service, the Final evaluation Report is enclosed.

Staffing: Documentation or demonstration of training competence was not in the staff files. Any nursing services shall be available in accordance with Iowa Code chapter 152 and 655-Chapter 6. [6.2(5)d(1)]

Food Service: No documentation submitted for the one person who is directly responsible for food preparation that has successfully completed a state-approved protection program.

The program displayed prompt action to correct the identified Regulatory Insufficiencies. The Department's findings must be based on the current situation, including but not limited to: staff interviews, documentation, monitor observations and tenant interviews.

Enclosed you will find the Assisted Living Program Certificate #S0071 with effective dates of **April 2, 2008** through **April 1, 2010.** This certificate must be posted in the building for public viewing.

We thank you and your staff for your cooperation during your recertification evaluation. If you have any questions regarding this certification, please contact me at 281-5077.

Sincerely,

Ann Martin

Ann Martin, Bureau Chief
Health Facilities Division
Adult Services Bureau

Enclosures

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

Assisted Living Program:

Ed Poush, Administrator
Mayflower Homes Assisted Living
616 Broad St.
Grinnell, IA 50112-2298

Date of Monitoring Visit:

April 2, 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 Mayflower Homes Assisted Living on April 2, 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	8
Current number of tenants with cognitive disorder	0
Total Population:	8

***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 three tenants was held. Tenants stated the program is kept clean, although it's not like home, but a close second. Staff are great, caring, helpful and knowledgeable. Tenants stated the food is good, there are enough activities, they feel safe in the program and are receiving the services they are paying for One tenant said, they wished the Administrator could fine a different location to store their oxygen tank. Tenants continue to make their own decisions and if there were an emergency they would use their emergency pendants or pull cords. The program would be recommended to others as a place to live.

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

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

A. 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]

Monitoring Observation: Three staff files were reviewed and indicated Staff #1 and #2's did not receive nurse delegation training related to medication administration. In an interview with the registered nurse, (RN) she felt if the staff had gone through a medication aide course there wasn't additional training needed.

- Regulatory Insufficiency: The program did not have sufficient trained staff available at all times to fully meet tenants' identified needs. (25.33(1))

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]

Monitoring Observation: The program was not able to provide a copy of the Dietary Manager's certificate food safety certificate related to food protection.

- Regulatory Insufficiency: The program did not provide documentation for Personnel who are employed by or contracting with the program and who is responsible for preparing or serving food or both preparing and serving food, have an orientation on sanitation and safe food handling prior to handling food and have annual in-service training on food protection. At a minimum, one person directly responsible for food preparation shall have successfully completed a state-approved protection program. (25.32(5))

C. Transportation – When the program provides transportation services directly or under contract with the program, the services shall be provided as required. [321 IAC 25.38]

Monitoring Observation: The program provided copies of the driver's license of the two employees providing programs transportation. Both are class "C" and do not indicate the needed endorsements. The program's mini bus, had all the necessary required safety equipment; however, the station wagon did not have safety triangles or a fire extinguisher inside.

- Regulatory Insufficiency: The program did not ensure the driver had an appropriate Iowa driver's license or commercial driver's license as required by law for the vehicle being utilized for transport. The driver shall meet any state or federal requirements for licensure or certification for the vehicle operated. (25.38(6))

- Regulatory Insufficiency: The program did not ensure each vehicle has a first-aid kit, fire extinguisher, safety triangles and a device for two-way communication. (25.38(7))

Dated this 29th day of May, 2008