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

Assisted Living Program:

Kathy Beal, Administrator
The Continental At St. Joseph's
19999 Saint Joseph Dr
Centerville, IA 52544-9032

Date of Monitoring Visit:

July 3, 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 The Continental at St. Joseph's on July 3, 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:	27
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:	6
Current number of tenants without cognitive disorder:	2
Total Population:	35

***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 two tenants was held. Tenants stated the program is kept clean and neat. Staff are kind, helpful and respectful. One tenant stated they wished staff would wait longer after knocking before they enter the room. Food quality is good. There are plenty of various activities to take part in if the tenant chooses. There were no safety concerns. Tenants felt they were getting what they were paying for and continue to make decisions. If there were an emergency, tenants stated they use their emergency call pendants. Both tenants would recommend the program as a place to live.

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. 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 #1, an 85 year old, was admitted on 12-16-06 with diagnoses of: Coronary Artery Disease and Alzheimer's disease. The tenant had an annual functional and cognitive evaluation completed on 1-15-08, but a health evaluation was not included.

Tenant #2, an 85 year old, was admitted on 5-23-08, with diagnoses of: Hypothyroidism and Hypertension. The program completed a 30 day functional and cognitive evaluation on 6-20-08, but a health evaluation was not included.

Tenant #3, an 81 year old, was admitted on 9-7-05, with diagnoses of: Arthritis, Seizures, Hyperlipidema and Alzheimer's Disease. Nurse's notes of 3-25-08, indicated the tenant was having increased confusion, tiredness, decreased appetite and foul odor to breath. Nurse's notes of 6-6-08, indicated the tenant had episodes of incontinence of stool and a reddened area to the sacrum was noted. Staff was to apply barrier cream in an effort to resolve and continue to monitor. Functional, cognitive and health evaluations were not completed with a change in condition.

- Regulatory Insufficiency: The program did not complete a functional, cognitive and health evaluation within 30-days of occupancy and as needed, but not less than annually, to determine the tenant's continued eligibility for the program and 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 #1's annual service plan of 1-15-08 was developed based on functional and cognitive evaluations; however, the health evaluation was not completed. Service plans were not consistently developed from functional, cognitive and health evaluations.

Tenant #2's 30 day service plan update was not based on functional, cognitive and health evaluations.

Tenant #3's current service plan was dated 9-20-07. It was not up-dated on 6-6-08 to reflect the change in condition and needed services.

- Regulatory Insufficiency: The program did not develop a service plan that was based on the evaluations conducted in accordance with 25.23(1) and 25.23(2) and be designed to meet the specific service needs of the individual tenant. (25.28(1))

- Regulatory Insufficiency: The program did not consistently update service plans when a tenant needs personal care or health-related care, within 30 days of occupancy and as needed, but not less than annually. (25.28 (3))

C. Structural requirements – The structure of the program shall be designed and operated to meet the needs of the tenants. The buildings and grounds shall be well-maintained, clean, safe and sanitary.

Monitoring Observation: During an inspection of the secured dementia-unit kitchen, the cabinet door on the left side of the kitchen sink was not fully secured. The cabinet held sanitizer for cleaning dinner tables and a 24 ounce spray can of oven and grill cleaner. There were also other chemicals noted to the right side of the sink. There were locks in place on the right; however, the left side of the sink could not be secured. A dresser in the dementia-unit dining room had a bottle of nail polish remover about three-fourths full, as well as numerous bottles of nail polish on top of it.

- Regulatory Insufficiency: The program did not consistently provide a building and grounds that are well maintained, clean, safe and sanitary. (25.40(1)b)

Dated this 15th day of August, 2008.