

INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

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PATTY JUDGE
LT. GOVERNOR

April 23, 2009

Ms. Nancy Ketcham, Administrator
Riverview Terrace
1501 St. Luke Drive
Spencer, IA 51301

RE: Final Recertification Monitoring Evaluation Report, Riverview Terrace, Spencer, IA

Dear Ms. Ketcham:

The Department of Inspections and Appeals (DIA) has completed the review of your Plan of Correction (POC) in response to the **Recertification Monitoring Evaluation Report**. Based upon a complete review of the Report and your actions to correct the identified Regulatory Insufficiencies, DIA accepts your POC. The Final report is enclosed.

The review of the recertification documents you submitted has been completed and the documents are accepted. In addition, the State Fire Marshal's (SFM) inspection report has been received as well as the Facility Engineer's approval of the Evacuation Plans for your program.

Enclosed you will find the Assisted Living Program Certificate with effective dates of **April 2, 2009 through April 1, 2011**. If you have any questions regarding this certification, please contact me at 515/281-5721.

Sincerely,



Tamara Halvorson
ASB Lead Certification Coordinator
Adult Services Bureau

Enclosure

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

Assisted Living Program:

Nancy Ketcham, Administrator
Riverview Terrace
1501 St. Luke Drive
Spencer, IA 51301

Date of Monitoring Visit:

March 25, 2009

Monitor(s):

Michael Streepy, 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 Riverview Terrace on March 25, 2009. In preparing this report, the following information was considered:

Current Program Census:

General Population Program (GPP)* – Not applicable.

Dementia Specific Program (DSP)* – A program that is a Dementia Specific Program by definition but may have tenants without cognitive disorder.

Current number of tenants in a DSP that serves 5 or more tenants with dementia or cognitive disorder staged between 4 and 7 on the Global Deterioration Scale (GDS):	6
Current number of tenants without cognitive disorder:	52
Total Population:	58

***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 14 tenants. The tenants stated the living environment is very nice with prompt response to any requests for repairs. Staff are very helpful and friendly with response to requests for assistance taking no more than 5 minutes. The food is good with plenty offered and substitutes available. Tenants stated satisfaction with the program activities stating they were very good with a variety of things offered. They feel safe in the program and participate in fire drills every month. Tenants stated they are receiving the services expected in occupancy agreements. They make their own decisions with no restrictions. The tenants stated satisfaction with medical services including: the nurse responding, emergency services, and physician or hospital arrangements. Tenants stated general satisfaction with the program and stated they would recommend it to friends and family members.

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

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

A. Nurse Review - Program provides a registered nurse to ensure the appropriate administration and documentation of medications, ensure that physician orders are current, and assess and document the tenants' health related activities. [321 IAC 25.30]

Monitoring Observation: Tenant #1, an 88 year old was admitted to the program 09-14-04 with diagnoses including: Alzheimer's Disease and Hypothyroidism. The tenant scored a 5 on the Global Deterioration Scale indicating moderately severe cognitive decline. Review of nurse's notes and a laboratory report with physician's orders dated 11-19-08 revealed the tenant had a urinary tract infection with an order for Bactrim DS twice daily for 7 days. The record contained no documentation of nurse review.

Tenant #2, an 81 year old was admitted to the program 03-30-08 with diagnoses including: Atrial Fibrillation, Hypertension, Hypothyroidism, Depression, Hyperlipidemia, Renal Insufficiency, Osteoporosis and Dementia. The tenant scored a 5 on the Global Deterioration Scale indicating moderately severe cognitive decline. Review of the nurse's notes dated 12-04-08 and Fax communication with the tenant's physician dated 12-3-08 revealed the tenant had a urinary tract infection with a physician's order for Bactrim DS once daily for 5 days and repeat the urinalysis after finishing the medication. The record contained no documentation of nurse review.

- Regulatory Insufficiency: The program did not consistently ensure the registered nurse would assess and document the health status of each tenant, make recommendations and referrals as appropriate, and monitor progress on previous recommendations if there are changes in health status. (25.30(3))

B. Other – The provisions of this section address the program's noncompliance with other applicable statutory and administrative rule requirements.

Monitoring Observation: Tenant #3, an 89 year old was admitted to the program 10-27-07 with diagnoses including: Gastro Esophageal Reflux Disease, Frequent Urinary Tract Infections, Depression, Osteoporosis, Angina and Hypothyroidism. The tenant scored a 29 out of 30 on the Mini Mental Status Examination. Review of the tenant's record revealed nurse's notes dated 02-08-09 indicating the tenant had fallen in the program's driveway and sustained a broken left hip. The tenant was transported to the hospital for treatment. Interview with the program nurse on 03-25-09 revealed the tenant had been admitted to the St. Luke's Lutheran Home for physical and occupational therapies and was expected back at the assisted living program within the next few days. The program nurse stated the Department of Inspections and Appeals had not been notified of the accident and injury. The finding was confirmed with the Administrator.

- Regulatory Insufficiency: The program did not consistently ensure the Department of Inspections and Appeals would be notified within 24 hours, by the most expeditious means available, of any accident causing substantial injury or death, and any substantial fire or natural or other disaster occurring at or near an assisted living program. (231C.12)

Dated this 23rd day of April, 2009.

