IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

January 22, 2010

Incident # 25804-M

Monica Hunter, Administrator
Meadowview Memory Care Village
3005 F Ave NW
Cedar Rapids, IA 52405-2944

RE: Final Incident Investigation Report, MeadowView Memory Care Village, Cedar Rapids, IA

Dear Ms. Hunter:

The Department of Inspections and Appeals (DIA) has reviewed the Plan of Correction (POC) in response to the Incident Investigation Report dated October 27 and 28, 2009. Based on the information provided, DIA accepts the POC. No further action on the part of the program is necessary.

We appreciate your prompt action in correcting the Regulatory Insufficiency. If you have questions, please contact me at 515-281-4116.

Sincerely,

Chris Nothaft
Certification Coordinator – Eastern Iowa
Adult Services Bureau

Iowa Department of Inspections and Appeals
Assisted Living Program
Final Complaint Investigation Report

Assisted Living Program: **Complaint Intake #: 25804-M**

Monica Hunter, Administrator
Meadowview Memory Care Village
3005 F Ave NW
Cedar Rapids, IA 52405-2944

Date of Investigation:

October 27 & 28, 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 26.2(5)(a)]. 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 Complaint Investigation 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 321 IAC - chapter 25 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 special care for persons with cognitive disorder or dementia, such as Alzheimer's disease, in a dedicated setting.

Overview:

A complaint investigation on-site visit was conducted at MeadowView Memory Care Village on October 27 & 28, 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):	39
Current number of tenants without cognitive disorder:	1
Total Population:	40

***These are the census numbers represented by the program to be applicable at the time of the on-site.**

Accreditation Status – Not applicable.

Program History – There were substantiated Regulatory Insufficiencies this certification period in the areas of: Service Plans and Other (not implementing the POC).

The June 30, 2008 complaint investigation revisit resulted in a discontinuation of the sanctions and issuance of a standard certificate. There were no Regulatory Insufficiencies.

The May 8 & 9, 2008 complaint investigation revisit resulted in a $2,500.00 civil penalty and sanctions that included: a continuation of the Conditional Certificate, effective November 5, 2007, the ability to admit up to 8 new tenants per month and monthly completion of nurse reviews. Regulatory Insufficiencies were cited in the areas of: Service Plans and Other (not implementing the POC).

Complaint Investigation – The complaint investigator(s) made the observations detailed in the following areas.

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

During the course of the investigation, the following information was obtained:

Monitoring Observation: Tenant #1, 86 years old, was admitted to the program on 10-14-08 with diagnoses including: Dementia, Diabetes, Mild Depression and a History of Breast Cancer with a Left Mastectomy. The tenant scored a five on the Global Deterioration Scale (GDS) indicating moderately severe cognitive decline. Interviews with Staff #1, #2 and #3 confirm staff had given the tenant showers on at least two occasions when the tenant had refused.

Tenant #2, 91 years old, was admitted to the program on 09-12-09 with diagnoses including: Dementia, Depression, Anxiety, Osteoarthritis and Gastroesophageal Reflux Disease. The tenant scored a four on the GDS indicating moderate cognitive decline. Interviews with Staff #3 and #5 confirm staff had given a shower to the tenant after the tenant had refused.

- Regulatory Insufficiency: The program did not adequately complete the dementia-specific education for program personnel. (IAC r. 25.34).

Dated this 22nd day of January, 2010.