IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

March 23, 2010

Complaint: #27786-C

Gary L. Shebeck
Newton Village
110 N. 5th Avenue W.
Newton, IA 50208-3186

RE: Final Complaint Investigation Report, Newton Village, Newton, IA

Dear Mr. Shebeck:

Enclosed is the **Final Complaint Investigation Report** completed by the Department of Inspections and Appeals (DIA) in accordance with Iowa Code 231C.7 (2010) and 481 Iowa Administrative Code, chapters 481—69, pertaining to assisted living programs and 481—67.12(3), pertaining to monitoring, civil penalties and complaints regarding assisted living programs. **No Regulatory Insufficiencies were identified.**

A copy of the monitor's **Complaint Investigation Report** is enclosed for your information and as a record of the result of this investigation.

If you have any questions regarding this Report, please contact me at 515-281-5003.

Sincerely,

Connie Schaffer

Connie Schaffer
Certification Coordinator – Central Iowa
Health Facilities Division
Adult Services Bureau

Enclosure

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

Assisted Living Program: **Complaint Intake #: 27786-C**

Gary L. Shebeck
Newton Village
110 N. 5th Avenue W.
Newton, IA 50208-3186

Date of Investigation:

March 15, 2010

Monitor(s):

Vickie Clingan, RN, MA

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. IAC r. 481-67.10(5). 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 481 IAC chapter 69 that: serves fewer than fifty-five (55) tenants and has five (5) or more tenants who have dementia between Stages 4 and 7 on the Global Deterioration Scale or serves 55 or more tenants and 10 percent or more of the tenants have dementia between Stages 4 and 7 on the Global Deterioration Scale or holds itself out as providing specialized care for persons with dementia, such as Alzheimer's disease, in a dedicated setting.

Overview:

A complaint investigation on-site visit was conducted at Newton Village on March 15, 2010. In preparing this report, the following information was considered:

Current Program Census:

General Population Program (GPP)* – A program that does not include a Dementia Specific unit, but may have tenants with cognitive disorder.

Current number of tenants without cognitive disorder:	28
Current number of tenants with cognitive disorder:	0
Total Population of GPP:	28

Dementia Specific Program (DSP)* – A program that is dementia specific and provides specialized care in a dedicated setting.

Total Population of DSP:	8

Total Census of ALP: 36

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

Tenant/Family Satisfaction Results – Not applicable.

Program History – There have been no substantiated Regulatory Insufficiencies during this recertification period.

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

A. Service Plan

Complaint Allegation: It was alleged activity staff did not individualize activities for tenants.

- Monitoring Observation: Activities were addressed on four of four service plans reviewed. Three staff and one family were interviewed and all agreed they either completed one-to-one activities with tenants on the Dementia Unit or had seen them done.

- Regulatory Insufficiency: None noted.

B. Staffing

Complaint Allegation: The complainant alleged the Supervisor on the Dementia Unit did not always supervise the tenants and left the area unattended to go visit with others on the assisted living side.

- Monitoring Observation: As a result of three staff interviews, one family interview, a review of the scheduling for the Dementia Unit, and observations of tenants on the unit, it was concluded tenants received the necessary supervision.

- Regulatory Insufficiency: None noted.

C. Activities

Complaint Allegation: The complainant alleged the Activity Director is never on the Dementia Unit and refuses to give the tenants choices, such as what songs they sing.

- Monitoring Observation: During interviews with three staff and one family member, all agreed the program provided a number of activities for the entire program, especially for the tenants on the Dementia Unit. It was also noted the Activity Director was on the unit almost daily. According to staff interviews and observation, the activity staff provides a daily list of activities for the unit. During an observation of the Dementia Unit, it was noted the tenants had a sitting porch facing an enclosed court yard that tenants used frequently. The porch contained comfortable sitting chairs and the tenants had been working a puzzle on the porch. The court yard contained raised planter boxes where, according to staff, the tenants will be planting flowers in the spring.

- Regulatory Insufficiency: None noted.

D. Tenant Rights

Complaint Allegation: It was alleged the tenants on the Dementia Unit were doing the work for the staff while staff watch them. It was also alleged staff had written a paper saying tenants were not allowed to use their own bathrooms during the day. They had to use the common area bathroom. It was also alleged tenants had to attend all activities and work in the common area.

- Monitoring Observation: According to three staff interviews and one family interview, tenants are not made to do anything they do not wish to do and they do not do the work of the staff unless they wish to help with such activities as rolling the silverware in the napkins. They also stated tenants were allowed to use their own bathroom and no one knew anything about a paper stating tenants had to use the common area bathroom. During group interview, tenants stated they made their own choices and were not forced to do anything. During on observation on 3/15/2010 on the Dementia Unit, a tenant left the table after lunch and staff assisted them to their room. The tenant was not forced to clean his/her plate before leaving the table. During two observations made on the unit the morning and afternoon on 3/15/2010, the tenants were never observed doing any work for the staff.

- Regulatory Insufficiency: None noted.

Dated this 23rd day of March, 2010.