

INSPECTIONS & APPEALSCHESTER J. CULVER
GOVERNOR

DEAN A. LERNER, DIRECTOR

PATTY JUDGE
LT. GOVERNOR

April 19, 2010

Complaint: #26348-CK'Lee Lathum, Administrator
Shores at Pleasant Hill
1500 Edgewater Drive
Pleasant Hill, Iowa 50327-0921**RE: Final Complaint Investigation Report, Shores at Pleasant Hill, Pleasant Hill, IA**

Dear Ms.Lathum:

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
Certification Coordinator – Central Iowa
Health Facilities Division
Adult Services Bureau

Enclosure

LUCAS STATE OFFICE BUILDING, 321 EAST 12TH STREET, DES MOINES, IOWA 50319-0083

ADMINISTRATION
(515) 281-5457
FAX: (515) 242-6863ADMINISTRATIVE HEARINGS
(515) 281-6468
FAX: (515) 281-4477

Telephone Number for the Hearing Impaired: (515) 242-6515

HEALTH FACILITIES
(515) 281-4115
FAX: (515) 242-5022INVESTIGATIONS
(515) 281-5714
FAX: (515) 242-6507

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

Assisted Living Program:

Complaint Intake #: 26348-C

K'Lee Lathum, Administrator
Shores at Pleasant Hill
1500 Edgewater Drive
Pleasant Hill, Iowa 50327-0921

Date of Investigation:

January 11, 12, 13 & 14, 2010

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. 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 Shores at Pleasant Hill on January 11, 12, 13 & 14, 2010. 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: 61

Current number of tenants with cognitive disorder: 3

Total Population of GPP: 64

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

Total Population of DSP: 27

Total Census of ALP: 91

***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 substantiated Regulatory Insufficiencies in the areas of: Evaluation of Tenants, Service Plan, Medications, Nurse Review, Staffing, Structural Requirements and Other during this certification period.

The complaint history during this certification period includes the complaint investigations of: September 24 and 25, 2008 for Complaint investigation of #19359-C, 19544-C and 19778-I with a Regulatory Insufficiency in the area of Medications, which resulted in a \$500.00 fine.

October 29, 2008, for Complaint investigation of #20566-I with Regulatory Insufficiencies in the areas of: Medications and Staffing, which resulted in a \$2,500.00 fine.

January 8, 2009, for the first revisit on Complaints #19359-C, 19544-C, 19778-I and 20566-I with Regulatory Insufficiencies in the areas of: Medications, Structural Requirements and Other, which resulted in a \$2,500.00 fine.

February 23, 2009, for Complaint investigation of #21747-C with no substantiated Regulatory Insufficiencies at this investigation visit.

June 10, 2009, for Complaint investigation of #23582-C with Regulatory Insufficiencies in the areas of: Evaluation of Tenants, Service Plan and Nurse Review.

August 25 & 26, 2009 for Complaint investigation of #24679-C, 24733-C and 25023-C with Regulatory Insufficiencies in the areas of: Medications and Staffing, which resulted in a \$1,000.00 fine.

November 10, 11 & 12, 2009, for Complaint investigation of #25173-C and a Self-Reported Incident of #26065-I with no substantiated Regulatory Insufficiencies at this investigation visit.

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

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

A. Occupancy Agreement

Complaint Allegation: Complaint 26348-C alleges Tenant #8 needed to pay for the apartment even though the tenant was in the hospital.

- Monitoring Observation: Tenant #8, a 90 year old was admitted to the program on 10-13-09 with diagnoses including: Hypertension, Macular Degeneration, Deep Vein Thrombosis, Congestive Heart Failure, Osteoporosis, Mitral Valve Prolapse, Myocardial Infarction, Renal Insufficiency and Hypothyroidism. Review of the tenant's file reveals the tenant had been transferred to the hospital on 11-16-09 and had not returned. The tenant's family gave 30 day notice on 11-30-09.

Review of the Occupancy Agreement item, 4.5 Transfer Criteria and Termination, states in part: "If Tenant transfers to a health program, Tenant will be obligated to continue paying the Monthly Lease Fee during the period of absence, until such time as the Tenant advises the Landlord in writing that the transfer is permanent, at which time this agreement will be terminated. The Tenant agrees to continue to pay the monthly lease fee until the tenant or the tenant's representative removes all Tenant personal belongings from the apartment."

- Regulatory Insufficiency: None noted.

B. Evaluation of Tenant

Complaint Allegation: Complaint 26348-C alleges Tenant #8 had an episode of strange behavior with slurred speech on 11-16-09. The registered nurse (RN) could not be located for 15 minutes and then did not take the tenant's temperature.

- Monitoring Observation: Nurses Notes for Tenant #8 indicated on 11-17-09, a late entry for 11-16-09 indicating the tenant had been assessed at approximately 5:00 pm and it was determined the tenant should be transferred to the hospital. The notes did not include the tenant's temperature.
- Regulatory Insufficiency: None noted.

C. Medications

Complaint Allegation: Complaint 26348-C alleges Tenant #8 was not given Synthroid medication for the period the tenant was in the program.

- Monitoring Observation: A review of the Physicians orders and Medication Administration Records for Tenant #8 indicated from the day of admission through transfer to the hospital, there was no order for Synthroid. Interview with the RN revealed the family had provided a list of the tenant's medications and medication bottles at the preadmission visit and the information was confirmed with the physician the day before admission 10-12-09. The orders for medications were not changed with the physician visit on 10-16-09.
- Regulatory Insufficiency: None noted.

D. Structural requirements

Complaint Allegation: Complaint 26348-C alleges Tenant #9 who lived across the hall from Tenant #8, fell and staff did not respond to the call light or pendant to assist the tenant.

- Monitoring Observation: Tenant #9, a 78 year old had been admitted to the program on 09-04-09 with diagnoses including Parkinson's Disease and Fuques Dystrophy. The Tenant had a score of 2 on the Cognitive Ability Assessment indicating low risk for cognitive impairment. Review of the tenant's record revealed an incident report dated 11-7-09 describing an incident in the tenant's apartment where the tenant's legs gave out and the tenant sat on the floor. The tenant was interviewed on 1-14-10 and stated he/she had fallen earlier in November but denied having any problem with the call system or with getting staff to respond. The tenant had no documented injuries. Interview with the Administrator and review of work order documentation revealed no concerns with the pendant or call systems.
- Regulatory Insufficiency: None noted.

Dated this 19th day of April, 2010.