IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

February 4, 2010

Gary Tiemeyer, Administrator
Heritage Court Assisted Living
1499 Office Park Rd
West Des Moines, IA 50265-6500

RE: Recertification Monitoring Evaluation Report, Heritage Court Assisted Living, West Des Moines, IA

Dear Mr. Tiemeyer:

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.

Enclosed you will find the Assisted Living Program Certificate with effective dates of **January 8, 2010 through January 7, 2012**. If you have any questions regarding this certification, 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 Recertification Monitoring Evaluation Report

Assisted Living Program:

Gary Tiemeyer, Administrator
Heritage Court Assisted Living
1499 Office Park Rd
West Des Moines, IA 50265-6500

Date of Monitoring Visit:

December 22, 2009

Monitor(s):

Hal L. Chase, RN BSN MPH

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 Heritage Court Assisted Living on December 22, 2009. 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:	22
Current number of tenants with cognitive disorder:	3
Total Population:	25

Dementia Specific Program (DSP)* – Not applicable.

***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 12 tenants in attendance. Tenants stated the program was "comfy" and a nice place to live. Tenants stated staff responded within 5 minutes of being called, were efficient and trained to provide the services needed. Tenants stated the Registered Nurse was always available when called. Tenants stated the food was good, with a variety offered, hot foods were served hot and cold food served cold. Tenants would like staff available when sitting down for meals, and like raising their hands when needing assistance. Tenants stated they would like more activities in the Assisted Living instead of going to the nursing facility, which is attached to the program. Tenants stated they make their own decisions and receive the services needed. Tenants stated they are generally satisfied with the program and would recommend it to friends and family.

Program History – There have not been any substantiated Regulatory Insufficiencies during this recertification 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: Four files were reviewed. Tenant #1, a 92 year old was admitted to the program on 4-10-01. Diagnoses included: Arthritis and a History of Pacemaker Placement. A cognitive evaluation completed on 1-27-09, staged the tenant at a four on the Global Deterioration Scale (GDS), which indicated moderate cognitive decline. An annual cognitive evaluation was completed on 1-27-09; however, functional and health evaluations were not completed. The Registered Nurse (RN) stated she did not complete functional and health evaluations within 30 days of admission, with a change in health status and annually.

Tenant #2, an 84 year old, was admitted to the program on 7-15-09. Diagnoses included: Diabetes Mellitus, History of Hiatal Hernia, Diverticulosis, Anemia and Alzheimer's Disease. Functional cognitive and health evaluations were not completed within 30-days of admission.

Tenant #3, a 91 year old was admitted to the program on 3-13-08. Diagnoses included: Osteoarthritis, Cerebral Vascular Accident, Coronary Artery Disease, Depression Hypothyroidism, Dementia, History of a Urinary Tract Infection and Hypertension. A cognitive evaluation completed on 12-15-09, staged the tenant at a four on the Global Deterioration Scale (GDS), which indicated moderate cognitive decline. Annual functional, cognitive and health evaluations were not completed to support an annual service plan of 11-20-09. The tenant was hospitalized on 12-2-09 for increased weakness and increased confusion. The tenant was discharged on 12-5-09 and was placed in a skilled nursing facility until 12-16-09 when the tenant returned to the program. A service plan was updated on 12-16-09, which indicated staff were to provide two-hour toileting reminders, to check the tenant's undergarments for incontinence, to encourage the tenant to walk short distances, to take rest breaks as the tenant tires easily and becomes unsteady at times. The program completed a cognitive evaluation on 12-15-09, but did not complete functional and health evaluations with a change in health status.

- Regulatory Insufficiency: The program did not evaluate each tenant's functional, cognitive and health status 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. The evaluation shall be conducted by a health care professional or human services professional. (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: Four files were reviewed. Tenant #1's annual service plan was updated on 1-28-09 but was not supported by functional and health evaluations.

Tenant #2's service plan was not updated within 30 days of admission.

Tenant #3's annual service plan was completed on 11-20-09 but was not supported by functional, cognitive and health evaluations. The tenant was hospitalized on 12-2-09 for

increased weakness and increased confusion. The tenant was discharged on 12-5-09 and was placed in a skilled nursing facility until 12-16-09 when the tenant returned to the program. A service plan was updated on 12-16-09 and indicated staff were to provide two-hour toileting reminders and to check the tenant's undergarments for incontinence and to encourage the tenant to walk short distances, to take rest breaks s the tenant tires easily and becomes unsteady. The program did not complete functional and health evaluations to support the development of the tenant's service plan of 12-16-09.

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

- Regulatory Insufficiency: The program did not update a service plan within 30 days of occupancy and as needed, but not less than annually, by a multidisciplinary team that consists of no fewer than three individuals, including a health care professional and other staff appropriate to meet the needs of the tenant, in consultation with the tenant and, at the tenant's request, with other individuals identified by the tenant, and if applicable, with the tenant's legal representative. (25.28)(3)

Dated this 4th day of February, 2010.