IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

DEMAND LETTER
CERTIFIED

Incident: #27904-I

May 18, 2010

Tara Koestner, Administrator
Continental at St. Joseph's Assisted Living
19999 St. Joseph's Drive
Centerville, IA 52544-9032

RE: I. Final Incident Investigation Report, Continental at St. Joseph's Assisted Living, Centerville, IA
II. Appeals/Hearings
III. Civil Penalty
IV. Conclusion

Dear Ms. Koestner:

I. Final Incident Investigation Report, Continental at St. Joseph's Assisted Living, Centerville, IA

Enclosed is the **Final Incident Investigation Report** completed by the Department of Inspections and Appeals (DIA) in accordance with Iowa Code chapter 231C, Iowa Administrative Code (IAC) chapters 481—67 and 481—69. The report notes a Regulatory Insufficiency in the area of Life Safety. Continental at St. Joseph's Assisted Living ("Program") is being assessed a $1,000.00 civil penalty.

DIA is accepting the Plan of Correction (POC) following the program's submission of additional information.

II. Appeals/Hearings

The Program may appeal the DIA decision in accordance with 481 IAC rule 67.13, within 30 days of notice, by submitting a request for appeal to DIA. A contested case hearing will be held pursuant to 481 IA C chapter 10. If the Program appeals, the civil penalty will be suspended, pending appeal process.

III. Civil Penalty

If, within thirty (30) days of the receipt of this demand letter, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty-five percent (35%) pursuant to IAC rule 67.12(3)d. If you do not wish to request a formal hearing or wish to withdraw your request for formal hearing, please send written notice to the Certification Coordinator and remit the penalty assessed by check or money order in the amount of six hundred fifty dollars ($650.00) within 30 business days after the receipt of this demand letter.

IV. Conclusion

The Program is being assessed a $1,000.00 civil penalty. DIA may revisit the Program to confirm compliance in fulfilling the POC's corrective measures. If the Program wishes to appeal or request a hearing on the final findings, the Program may do so within 30 days of this letter.

If you have any questions regarding this letter and report, please contact your Certification Coordinator, Connie Schaffer, at 515-281-5003.

Sincerely,

Ann Martin

Ann Martin, Bureau Chief
Adult Services Bureau

Enclosure

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

Assisted Living Program: **Incident Intake:** #27904-I

Tara Koestner, Administrator
Continental at St. Joseph's Assisted Living
19999 St. Joseph's Drive
Centerville, IA 52544-9032

Date of Incident Investigation:

April 12, 2010

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. 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 an Incident 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:

An on-site visit was conducted at Continental at St. Joseph's Assisted Living on April 12, 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:	49
Current number of tenants with cognitive disorder:	0
Total Population of GPP:	49

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

Total Population of DSP:	10

Total Census of ALP: 59

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

Tenant/Family Satisfaction Results – N/A

Program History – There have been substantiated Regulatory Insufficiencies in the areas of: Evaluation of Tenant, Service Plan and Structural Requirements during this recertification period.

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

A. Life Safety

Incident Allegation: The program reported Tenant #1 exited the dementia unit through the patio doors which led to a courtyard. The tenant then exited the courtyard, as the courtyard gate was not locked and walked back into the program's general population through an unlocked door.

- Monitoring Observation: Tenant #1, a 94 year old, was admitted on 9-21-07 and has diagnoses of: Dementia, Status Post Head Injury, Osteoarthritis, History of Left Hip Fracture, Dysphagia, History of Blood in the Urine and Hard of Hearing. The tenant was discharged from the program on 3-31-10. The tenant was staged at four on the GDS on 10-14-09, which indicated moderate cognitive impairment. Nurse's notes indicated the tenant was admitted to the dementia unit on 2-17-10, as the tenant required ongoing reminders and redirection. Nurse's notes of 3-11-10 indicated the tenant exited through patio doors at 7:23 p.m. and re-entered the facility at 7:31 p.m. The Administrator indicated the patio doors were not alarmed and the courtyard gate was not locked during the time of this incident. The tenant walked around the building to the lower level of the general population unit and entered through the service entrance which was not alarmed. The Administrator stated the patio door was alarmed and activated on 3-12-10. The courtyard is not required to be locked, per Life Safety Code regulations. The program nurse stated the patio door was alarmed on 3-12-10 after the tenant had eloped from the dementia unit.

- Regulatory Insufficiency: An operating alarm system shall be connected to each exit door in a dementia-specific program. (IAC r. 481- 69.32(2))

Dated this 18th day of May, 2010.