IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

DEMAND LETTER
CERTIFIED

May 17, 2010

Incident: #27073-C

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

RE: I. Final Complaint Investigation Report, Shores at Pleasant Hill Assisted Living, Pleasant Hill, IA
II. Appeals/Hearing
III. Civil Penalty
IV. Conclusion

Dear Ms. Lathum:

I. Final Complaint Investigation Report, Shores at Pleasant Hill Assisted Living, Pleasant Hill, IA

Enclosed is the **Final Complaint 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 Medications. Shores at Pleasant Hill Assisted Living ("Program") is being assessed a $1,500.00 civil penalty.

DIA has reviewed the Plan of Correction (POC) and the Request for Reconsideration in response to the complaint investigation Report dated January 11, 12, 13, & 14, 2010. Based on the information provided, DIA denies the Request for Reconsideration as the program did not follow the physician's orders. 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 IAC 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 nine hundred seventy-five dollars ($975.00) within 30 business days after the receipt of this demand letter.

IV. Conclusion

The Program is being assessed a $1,500.00 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 Complaint Investigation Report

Assisted Living Program: **Complaint Intake #: 27073-C**

K'Lee Lathum, Administrator
Shores at Pleasant Hill Assisted Living
1500 Edgewater Drive
Pleasant Hill, IA 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.

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. Evaluation of Tenant

Complaint Allegation: Complaint 27073-C alleges for three to four days care attendant staff had told nurses the tenant was ill before the registered nurse (RN) sent the tenant to the hospital. The tenant was returned with a diagnosis of Urinary Tract Infection (UTI) and medication. The complaint also states care attendants can't get nurses to come in and assess tenants who are in pain.

- Monitoring Observation: Tenant #10, an 81 year old had been admitted to the program on 6-21-08 with diagnoses including: Dementia, Legally Blind and Confusion. The tenant was staged at a three on the Global Deterioration Scale (GDS), indicating mild cognitive decline. Review of the tenant's record revealed nurse communication with the tenant's physician dated 11-8-09. The physician indicated the tenant was due to see the physician and orders for lab studies. Further communication with the tenant's physician dated 1-11-10, reviews the former contact and UTI, as well as a discussion regarding a fall and rib and back pain. The tenant was seen at the hospital and returned 1-13-10 and remained on Cipro for the UTI. Interviews with Staff #1, #25 and #26 indicated there have been no problems getting nurses to respond to concerns with tenants' needs or concerns.

- Regulatory Insufficiency: None noted.

B. Medications

Complaint Allegation: Complaint 27073-C alleges a tenant who had fallen and experiencing pain was ordered to have Vicodin. RN and staff administered the medication without a physician's order for the medication.

- Monitoring Observation: Tenant #10's indicated RN had communicated with the physician on 1-11-10 related to rib and back pain; and an order from the physician for Vicodin 5/500 on every four to six hours as needed. Review of the tenant's Medication Administration Record (MAR) indicated the medication was not given until after the order was written.

- Regulatory Insufficiency: None noted.

Complaint Allegation: Complaint 27073-C alleges a tenant had returned from the hospital with orders for heart, blood pressure medications and a topical medication. The tenant went for three days without the medications, as RN refused to come in, get the medications and place the order for them on the MARs.

- Monitoring Observation: Tenant #11, a 95 year old had been admitted to the program on 1-20-09 with diagnoses including: Frontal lobe Dementia, Hypertension (HTN), Coronary Artery Disease, Gastro-Esophageal Reflux Disease, Parkinson's Disease, Benign Prostatic Hypertension, Depression and Constipation. On 12-28-09 the tenant was staged at a three on the GDS, indicating a mild cognitive decline. Review of the tenant's record revealed the tenant had returned from the hospital on 12-28-09 with orders for new medications including Prevachol 10 milligrams daily, Metoprolol 12.5 milligrams twice daily, Plavix 75 milligrams daily, Norvasc 5 milligrams daily and

Nitro patch 0.2 milligrams on in the a.m. and off at p.m. Review of the MAR for December reveals the medications were started as they arrived at the program on 12-28-09.

- Regulatory Insufficiency: None noted.

Complaint Allegation: Complaint 27073-C alleges a tenant went a week and a half without receiving an ordered inhaler, due to the RN not writing administration times on the MAR, then writing the order for the administration on an as needed basis, as opposed to the physician order for the medication to be given two puffs every four hours.

- Monitoring Observation: Tenant #3, an 87 year old was admitted to the program on 5-27-07 with diagnoses including: Arthritis, HTN, Edema, Chronic Obstructive Pulmonary Disease, Benign Prostatic Hypertrophy, Congestive Heart Failure and Atrial Fibrillation. On 1-5-09 the tenant was staged at a three on the GDS, indicating a mild cognitive decline. Review of the tenant's record indicated a return from the hospital on 1-6-10 following a fall on 12-5-09 with a fracrtured pelvis while residing in the independent area of the program. On return the tenant was admitted to the assisted living area of the program with a physicians order dated 1-06-10 for a Combivent Inhaler two puffs every 4 hours. Review of the tenant's MAR revealed an indication for the medication to be given as needed with only one dose of the medication given on 1-8-10. Further review of the record revealed the order changed on 1-12-10 to two puffs every 6 hours while awake and the order was initiated on 1-12-10.

- Regulatory Insufficiency: When medications are administered traditionally by the program. The administration of medications shall be provided by a registered nurse, licensed practical nurse or advanced registered nurse practitioner registered in Iowa or by unlicensed assistive personnel in accordance with requirements in 655—Chapter 6 governing nurse delegation. (IAC r. 481- 67.5(6)a)

Complaint Allegation: Complaint 27073-C alleges an unknown tenant had not received eye drops as ordered and another tenant had orders for blood sugar measurements weekly were being done on a daily basis.

- Monitoring Observation: Tenant #12, an 82 year old had been admitted to the program on 08-20-09 with diagnoses including: Hypercholesterolemia, Glaucoma and History of By-Pass Surgery. The tenant was staged at a three on the GDS, indicating mild cognitive decline. Review of the tenant record revealed an order dated 12-28-09 directing staff to obtain fasting blood sugars on a weekly basis. The record indicated the staff had obtained the blood sugars on a daily basis from 1-5-10 through 1-14-10. The RN stated she did not know the blood sugars had been taken daily or why. A review of the MAR of all tenants did not indicate an omission or error in eye drop medications

- Regulatory Insufficiency: None noted.

Dated this 17th day of May, 2010.