IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

Complaint Intake: #29001-C
29458-C

July 27, 2010

Kylie Behm-Hewhard, Administrator
Waterford at Ames Assisted Living
1325 Coconino Road, Ste 300
Ames, IA 50010-7842

RE: Final Complaint Investigation Report – Waterford at Ames Assisted Living, Ames, IA

Dear Ms. Behm-Newhard:

Enclosed is the **Finanl Complaint Investigation Report** from the on-site monitoring visit of July 12 & 13, 2010, completed by the Department of Inspections and Appeals ("DIA") in accordance with Iowa Code chapter 231C and Iowa Administrative Code ("IAC") chapters 481—67 and 481—69. **No Regulatory Insufficiencies were identified.**

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

Sincerely,
Connie Schaffer

Connie Schaffer
Certification Coordinator - Central/Eastern
Adult Services Bureau

Enclosure

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

Assisted Living Program:

Kylie Behm-Newhard, Administrator
Waterford at Ames Assisted Living
1325 Coconino Road, Ste 300
Ames, Iowa 50010

Complaint Intake #: 29001-C
29458-C

Date of Investigation:

July 12 and 13, 2010

Monitor:

Joyce Kix, 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 Waterford of Ames on July 12 and 13, 2010. In preparing this report, the following information was considered:

Current Program Census:

General Population Program (GPP)* – Not applicable.

Dementia Specific Program (DSP)* – A program that is a Dementia Specific Program by definition but may have tenants without cognitive disorder.

Current number of tenants in a DSP that serves 55 or more tenants and 10 percent or more of the tenants have dementia between Stages 4 and 7 on the GDS:	54
Current number of tenants without cognitive disorder:	7
Total Population:	61

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

Program History – No substantiated Regulatory Insufficiencies during this recertification period.

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

A. Evaluation of Tenant

Complaint Allegation 29001-C: It was alleged the program failed to evaluate a skin rash.

- Monitoring Observation: Tenant #1, an 87 year old, was admitted 12-17-01 with diagnoses of: Hypertension, Depression, Osteoarthritis, Osteoporosis, Gastrointestinal Reflux Disorder, Anxiety and Dementia. The service plan of 12-20-09 documented the tenant received assistance with bathing, toileting and medication administration. The cognitive assessment completed on 12-20-09, documented the tenant scored 2, which indicated very mild cognitive decline. Resident Care note of 3-12-09 documented the tenant reported a rash on 2-26-09, was seen and treated by his/her primary care provider. The clinical record contained a physicians communication record dated 11-16-09, which indicated the tenant was seen and treated for Bullous Pemphigoid and skin was currently clear. The Dermatologist's order was to continue Minocycline (an oral antibiotic) and use Clobetasol topical for future break outs.

  Three additional clinical record were reviewed functional, cognitive and health evaluations were completed as required.

- Regulatory Insufficiency: None noted.

B. Nurse Review

Complaint Allegation 29001-C: It was alleged the nurse failed to make notification to the tenant's responsible party with condition updates.

- Monitoring Observation: Tenant #1 lived at the program from 12-17-01 to 4-8-10 and scored a 2 on the Cognitive assessment Global Deterioration Scale (GDS) indicating mild cognitive decline. As a tenant in an assisted living program, a tenant who is cognitively alert has the right to autonomy and to receive respect and privacy in their medical care program. The program would be required to notify family in the case of emergency or in the case of the tenant's transfer.

  Three additional clinical records were reviewed with no concerns noted with responsible party notification.

- Regulatory Insufficiency: None noted.

C. Food Service

Complaint Allegation 29001-C: It was alleged the food was at times inedible with a dull menu that did not vary.

- Monitoring Observation: The program provided a menu, with a four week rotation, which included a special order menu allowing tenants to order individual choices.

The monitor sampled a test meal, which included pork, sweet potatoes and cauliflower. The food tasted well seasoned and the meat could be cut with a fork.

Four tenants were interviewed. Tenant #1 reported the food quality had deteriorated. Tenant #2 felt the meat was horrible and too tough and the food quality had gone downhill. Tenant #3 stated most generally the food wasn't too bad. Tenant #4 reported satisfaction in all areas of the program.

- Regulatory Insufficiency: None noted.

D, Staffing

Complaint Allegation 29001-C and 29458-C: It was alleged the program staff threatened, intimidated, embarrassed and frightened tenants.

- Monitoring Observation: Four tenants were interviewed. None reported any concerns with fear or intimidation by staff or administration.

- Regulatory Insufficiency: None noted

E. Structural requirements

Complaint Allegation 29001-C: It was alleged the program structure had rooms with a great deal of black mold and numerous bugs.

- Monitoring Observation: Four tenants were interviewed and their rooms observed. The rooms were free from mold and odors and the tenants were satisfied with the program staff cleaning. Several dead bugs were noted around the perimeter of the room behind furniture.

  The program's Housekeeping Policy dated January 2009, documented weekly cleaning would include, vacuum carpets, mop tile floors, clean bathrooms including toilet, clean kitchen area and dust and straighten the apartment. Deep cleaning of the apartment including shampoo of carpets, moving furniture, paint touch-up etc. could be completed at the tenant's request and billed at the current ala cart rate.

  The program maintenance person reported after tenants moved, their rooms would be totally cleaned and painted and he had not observed any mold in any rooms. He also reported the program had a routine pest control service for bugs.

  Staff #1, housekeeping, stated she had not received any complaints of mold, mildew or bugs and had not cleaned any from any empty apartments.

- Regulatory Insufficiency: None noted.

Complaint Allegation 29458-C: It was alleged the tenant's could not control their room's temperature.

- Monitoring Observation: Four tenants were interviewed. All reported they controlled the heating and cooling levels in their rooms.

Staff #2 reported the temperature of one room of a cognitively impaired tenant was maintained by the program due to family request.

- Regulatory Insufficiency: None noted.

F. Other

Complaint Allegation 29001-C: It was alleged the program failed to send medications with the tenant at discharge.

- Monitoring Observation: The service plan signed by Tenant #1 12-20-09 indicated the program managed the medications. The clinical record contained a Resident Care Note dated 4-8-10 at 7:20 p.m. documented, "all medications have been ordered at new facility."

  The program policy for Medications indicated at discharge, all medications (for a med managed resident and received the medications from the facility pharmacy) would be returned to the pharmacy for credit to their individual account. If they receive medications from an outside source (ie VA) these will be given to the resident and/or family/POA to be given to the new facility.

  Tenant #1 transferred to a higher level of care to a nursing facility. During a phone interview to the facility, the Director of Nursing stated the facility had a list of the patient's medications and ordered them from a local pharmacy. The patient did not miss any does of medications

- Regulatory Insufficiency: None noted.

Complaint Allegation #29458-C: It was alleged tenants were not treated appropriately and with respect by staff at admission and re-admission.

- Monitoring Observation: Four tenants were interviewed. All stated they were treated with respect by all staff and had no concerns with administration or treatment by staff.

- Regulatory Insufficiency: None noted.

Dated this July day of 27th, 2010.