

INSPECTIONS & APPEALS

TERRY E. BRANSTAD
GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

KIM REYNOLDS
LT. GOVERNOR

March 8, 2011

Ms. Deanna Kahler, Manager
Arlington Place of Oelwein
1101 3rd Street SW
Oelwein, IA 50662

RE: Final Recertification Monitoring Evaluation Report – Arlington Place of Oelwein, Oelwein, IA

Dear Ms. Kahler:

Enclosed is the **Final Recertification Monitoring Evaluation Report** 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.

DIA has completed the review of your Plan of Correction (POC) and your Request for Reconsideration in response to the **Final 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.

Based on the information provided in the Request for Reconsideration, DIA denies your request as it relates to Other (non notification of accident causing serious injury). Although tenant is able to stand, bear weight and transfer, the tenant is not able to walk.

Enclosed you will find the Assisted Living Program Certificate **S0157** with effective dates of **October 9, 2010** through **October 8, 2012**.

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(515) 281-4115
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INVESTIGATIONS
(515) 281-5714
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If you have any questions in regard to this certification, please contact me at 515/281-7039.

Sincerely,

Rose Boccella

Rose Boccella
Program Coordinator
Adult Services Bureau

Enclosure

**Iowa Department of Inspections and Appeals
Assisted Living Program
Final Recertification Monitoring Evaluation Report**

Assisted Living Program:

Deanna Kahler, Manager
Arlington Place of Oelwein
1101 3rd Street SW
Oelwein, IA 50662

Date of Monitoring Visit:

February 17, 2011

Monitor(s):

Stephanie Cummins, MA

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 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 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 monitoring evaluation was conducted at Arlington Place of Oelwein on February 17, 2011. 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:	29
Current number of tenants with cognitive disorder:	0
Total Population:	29

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 with 13 tenants was held. The tenants reported the common areas were clean and housekeeping services were completed appropriately. There were no issues with housekeeping, maintenance or laundry. Nursing services were available as needed. Staff responded within five minutes and the tenants stated staff were required to respond within five minutes. The tenants received what was promised in the occupancy agreement. They requested improved communication with administrative staff. The tenants said staff were great and they were well trained. Staff treated them with respect and knocked before they came into their apartments. The tenants received all the services they requested. They stated second shift was very busy; however, did not report any outcomes. The temperature of the food was appropriate and there was enough variety. The tenants stated the meat was dry and tough at times. They requested more sugar free drinks and diabetic food options. The tenants also requested more fresh vegetables and fruits. The evening meal service time was a little slower, according to the tenants. The tenants received an activity calendar; however, it was requested the posted activities be lowered so all tenants could view them. There were enough activities offered; however, they requested more musical activities. They chose their own level of participation in activities. The tenants felt safe and made their own decisions. They were satisfied with the program and would recommend it to others.

Program History – The program did not receive any regulatory insufficiencies during this certification period.

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

A. Other

Monitoring Observation: Four tenant files were reviewed.

Tenant #1, a 68 year old, was admitted on 8-16-10 and diagnoses include: Status Post (S/P) Stroke and Aneurysm. According to the service plan the tenant used a wheelchair for primary mobility and wore a leg brace due to a stroke. The service plan indicated the tenant was independent with mobility and used a wheelchair. The plan indicated staff assisted the tenant getting into bed. The service plan indicated the tenant required stand by assist (SBA) to minimal assist for transfers from the whirlpool chair and back. The service plan indicated the tenant needed physical assistance for evacuation. The tenant was independent with toileting, grooming, eating and medications.

According to an Incident Report dated 12-21-10, the tenant paged at 7:37 a.m. and staff responded. The tenant was found lying on the floor next to the bed. The tenant reported he/she tried to get to the bathroom and fell. The tenant reported his/her right knee hurt and the knee was swollen. An ambulance was called and the tenant was sent to the hospital.

The nurse stated the tenant rolled out of bed, staff called an ambulance and the tenant was taken to the emergency room (ER) and was then transferred to another hospital. The tenant was diagnosed with a right femur fracture. The tenant had surgery and at the time of the onsite was at a skilled nursing facility (SNF). She stated prior to the incident the tenant self-transferred except when getting into bed. She stated the tenant was independent with transfers out of bed. The tenant was not able to walk; however, could pivot transfer.

The tenant fell and sustained a fractured femur. The tenant was sent to the hospital, had surgery and went to a higher level of care. The tenant had not been discharged from the program. The program did not report the major injury to the department within 24 hours of the next business day.

- Regulatory Insufficiency: The director or the director's designee shall be notified within 24 hours, or the next business day, by the most expeditious means available: Of any accident causing major injury. For the purposes of this rule, "major injury" shall also mean a substantial injury. (IAC r. 481-67.4(1))

Dated this 28th day of February, 2011.