IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

Complaint Intake #: 33891-C

June 22, 2011

K'lee Lathum, Administrator
Shores at Pleasant Hill
1500 Edgewater Drive
Pleasant Hill, IA 50327

RE: Final Complaint Investigation Report, Shores at Pleasant Hill, Pleasant Hill, Iowa

Dear Ms. Lathum:

Enclosed is the **Final Complaint Investigation 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 reviewed the Plan of Correction (POC) submitted in response to the **Preliminary Complaint Investigation Report**. Based upon a complete review of the Report and the Program's proposed actions to correct the identified Regulatory Insufficiency, DIA accepts the POC.

If you have any questions in regard to the enclosed Report, 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 Complaint Investigation Report

Assisted Living Program:

K'lee Lathum, Administrator
Shores at Pleasant Hill
1500 Edgewater Drive.
Pleasant Hill, IA, 50327

Complaint Intake #:

33891-C

Date of Investigation:

June 1, 2011

Monitor(s):

Joyce Kix, RN

Definitions:

The following definitions are relevant:

Regulatory Insufficiency - A violation of a statutory or rule provision within the Code of Iowa (2011) or the 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. [481 IAC 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 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 (GDS), or serves 55 or more tenants and 10 percent or more of the tenants have dementia between Stages 4 and 7 on the GDS, 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 was conducted at Shores of Pleasant Hill on June 1, 2011. In preparing this report, the following information was considered:

Current Program Census

Assisted Living Programs are defined by the type of population served. **Note**: The census numbers were provided by the Program at the time of the on-site.

General Population Program – A Program that is not Dementia-Specific, but may have tenants with cognitive disorder.

Number of tenants without cognitive disorder:	39
Number of tenants with cognitive disorder:	8
Total Population of Program at time of on-site	47

Dementia-Specific Program by Definition (DSP) – A Program that is Dementia-Specific by Definition but may have tenants without cognitive disorder.

Number of tenants in a DSP that serves fewer than 55 tenants and has five (5) or more tenants who have dementia between Stages 4 and 7 on the Global Deterioration Scale (GDS):	12
Number of tenants without cognitive disorder:	12
Total Population of Program at time of on-site	24

Dementia Specific Program by Dedication – A Program that is not Dementia-Specific, but may have tenants with cognitive disorder receiving special care in a dedicated setting.

Number of tenants without cognitive disorder:	0
Number of tenants with cognitive disorder:	12
Number of tenants receiving specialized care in a dedicated setting:	12
Total Population of Program at time of on-site	12

Total census of program including (all levels of care) - 83

Accreditation Status – Not applicable

Program History – The program received regulatory insufficiencies in the areas of: Evaluation, Service Plan and Medications during the recertification and complaint (30944) visit of 9-30 and 10-4-2010.

During the complaint visit (32829, 32397, 32916) of 2-21, 22-2011, the program received regulatory insufficiencies in the areas of: Tenant Rights and Staffing.

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

A. Occupancy Agreement

Complaint Allegation: It was alleged that prospective tenants were advised verbally during the admission process that the program would accept Medicaid payment for reimbursement when the tenant ran out of money to pay privately.

Monitoring Observation: Six tenant records were reviewed. Three were current tenants and three had been discharged.

Page 3 of the Occupancy Agreements (legal document) documented the following: "Program will accept private insurance, HUD Rental Assistance and Medicaid Elderly Waiver payments. Tenant is responsible for the difference between the total charges and the amount paid by the Third Party Payor. In the event Tenant becomes ineligible or charges are denied, Tenant is responsible for all monthly fees."

Page 1 of the Acknowledgement of Tenancy Guidelines for Memory Care Program (informational document) documented: "Tenant's finances will be managed by a designated responsible party (i.e. POA, Conservator, or designated family member). Tenant/designated party meets the financial requirements of the program. (The Shores at Pleasant Hill has no contracts with public agencies for reimbursement and accepts only private pay.)"

During interview on 6-1-11, the Administrator reported the program had initiated the process in June of 2010 to license the program so they could accept Medicaid reimbursement; however, in September of 2010, the owners of the program decided not to follow through and returned the license. The Administrator stated the program currently accepted only private pay.

Staff #1, (a marketing representative) stated that during the time period of June to September 2010, she did talk to people and advised them the program was in the process of accepting Title XIX but she did not promise anything.

During interview, family members reported they had been told during the admission process that the program would accept Medicaid reimbursement after the tenant had used up all other resources. They stated that they did not get that statement in writing and the only signed document they had was the occupancy agreement.

Current tenants interviewed did not express any concerns with financial agreements.

The program does not have appropriate documentation in place to accept Medicaid reimbursement and does not accept Medicaid monies. The Occupancy Agreement is not accurate regarding acceptance and/or financial arrangements accepted by the program.

Regulatory Insufficiency: The occupancy agreement shall be reviewed and updated as necessary to reflect any change in services or financial arrangements. (IAC 481 r. 69.21(3))

Dated this 21st day of June 2011.