IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

March 1, 2012

Ms. Nan Sloan, Director
Westhaven Community Assisted Living
112 West 4th Street
Boone, IA 50036

RE: Final Initial Certification Monitoring Evaluation Report, Westhaven Community Assisted Living, Boone, IA

Dear Ms. Sloan:

Enclosed is the **Final Initial Certification 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. Based upon a complete review of the Report and your actions to correct the identified Regulatory Insufficiencies, DIA accepts your POC and certification of Westhaven Community Assisted Living will continue. The Request for Reconsideration has been denied due to the information provided does not satisfy the rule requirements.

Enclosed you will find the Assisted Living Program Certificate **S0321** with effective dates of **September 9, 2011** through **September 8, 2013**. This certificate is to be posted in the building for public viewing.

If you have any questions regarding this certification, please contact me at 515/281-4116.

Sincerely,

Jim Berkley

Jim Berkley
Program Coordinator
Adult Services Bureau

Enclosure

IOWA DEPARTMENT OF INSPECTIONS AND APPEALS
Assisted Living Program
Final Initial Certification Monitoring Evaluation Report

Assisted Living Program:

Nan Sloan, Director of Operations
Westhaven Community Assisted Living
112 West 4th Street
Boone, IA 50036

Date of Monitoring Visit:

February 2, 2012

Monitor(s):

Lori Miner, RN BSN

Definitions: ***The following definitions are relevant:***

Assisted Living Program – A program certified under 481 IAC 69 that provides housing with contracted services to three or more tenants in a physical structure that provides a homelike environment. Services may include but are not limited to health-related care, personal care, and assistance with instrumental activities of daily living. A General Population Program is an Assisted Living Program that is not dementia-specific but may have tenants with cognitive disorder.

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.

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 statutory or rule violations. The plan should identify how and by what date each regulatory insufficiency will be corrected, and what measures will be taken to ensure the problem does not recur. The plan is due to DIA within ten (10) working days of the program's receipt of a Complaint/Incident Investigation Report. Depending on the circumstances, DIA may revisit the assisted living program to confirm progress in fulfilling a plan's corrective measures.

Overview: ***In preparing this report, the following information was considered:***

Current Program Census

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

General Population Program	
Number of tenants without cognitive disorder:	5
Number of tenants with cognitive disorder:	1
Total Population of Program at time of on-site	6
TOTAL census of Assisted Living Program	6

Tenant/Family Satisfaction Results – A meeting was held with four tenants. The best thing about the Program was not having to do anything. Housekeeping was done to the tenants' satisfaction both in apartments and in common areas. Tenants use a call pendant to request assistance. Staff members were reported to respond in less than five minutes. Assistance is available from the attached nursing facility during the night. Staff members were described as providing good care, and treating tenants with kindness and respect. The food was generally good with an alternative menu available. There was a variety of foods served including fresh fruits and vegetables. Activities were available both in the assisted living program and the attached nursing facility. Tenants reported feeling safe at the Program and would recommend it to others.

Program History – The program did not have any regulatory insufficiency history prior to this certification period.

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

A. Evaluation of Tenant

Monitoring Observation: Tenant #1, an 83 year-old, was admitted on 10-1-11 and had diagnoses of: Expressive Aphasia, Arthritis, Asthma, Atrial Fibrillation, Coronary Artery Disease, and Hypertension (HTN). Tenant #1 was staged at four on the Global Deterioration Scale which indicated moderate cognitive decline. Functional and cognitive evaluations were completed on 9-12-11, prior to admission. A health evaluation was not completed prior to admission.

Tenant #2, a 94 year-old, was admitted on 10-1-11 and had diagnoses of: HTN, History of Colon-Rectal Cancer, Hypothyroidism, and Central Retinal Vein Occlusion Right Eye. Functional, cognitive and health evaluations were completed on 9-29 and 9-30-11, prior to occupancy. A health evaluation was not completed within 30 days of occupancy.

Tenant #3, a 91 year-old, was admitted on 12-5-11 and had diagnoses of: Diabetes, Degenerative Joint Disease, HTN, and Anemia. Functional and cognitive evaluations were completed 12-29-11, within 30 days of occupancy. A health evaluation was not completed within 30 days of occupancy.

Regulatory Insufficiency: A program shall evaluate each prospective tenant's functional, cognitive and health status prior to the tenant's signing the occupancy agreement and taking occupancy of a dwelling unit in order to determine the tenant's eligibility for the program, including whether the services needed are available. The cognitive evaluation shall utilize a scored, objective tool. When the score from the cognitive evaluation indicates moderate cognitive decline and risk, the Global Deterioration Scale shall be used at all subsequent intervals, if applicable. If the tenant subsequently returns to the tenant's mildly cognitively impaired state, the program may discontinue the GDS and revert to a scored cognitive screening tool. The evaluation shall be conducted by a health care professional or human service professional. (IAC r. 481-69.22(1))

Regulatory Insufficiency: A program shall evaluate each tenant's functional, cognitive and health status within 30 days of occupancy. A program shall also evaluate each tenant's functional, cognitive and health status as needed with significant change, but not less than annually, to determine the tenant's continued eligibility for the program and to determine any changes to services needed. The evaluation shall be conducted by a health care professional or human service professional. A licensed practical nurse may complete the evaluation via nurse delegation when the tenant has not exhibited a significant change. (IAC r. 481-69.22(2))

B. Nurse Review

Monitoring Observation: Tenant #1 was admitted on 10-1-11. The service plan indicated Tenant #1 received assistance with bathing and medications. Documentation within the file indicated medication administration records (MAR's) and physician orders were reviewed. The file lacked documentation of an assessment of Tenant #1's health status every 90 days.

Tenant #2 was admitted on 10-1-11. The service plan indicated Tenant #2 received assistance with bathing. A medical history and physical exam form, dated 1-14-11, which was approximately one year prior, and signed by a health care provider, lacked documentation of a review of systems. The form was not complete. The file lacked documentation of an assessment of Tenant #2's health status every 90 days.

Regulatory Insufficiency: If a tenant does not receive personal or health-related care, but an observed significant change in the tenant's condition occurs, a nurse review shall be conducted. If a tenant receives personal or health-related care, the program shall provide for a registered nurse or a licensed practical nurse via nurse delegation: **(3)** To assess and document the health status of each tenant, to make recommendations and referrals as appropriate, and to monitor progress relating to previous recommendations at least every 90 days and whenever there are changes in the tenant's health status.
(IAC r. 481-69.27(3))