

INSPECTIONS & APPEALS

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Complaint/Incident Intake #: 37712-C

March 6, 2012

Yvonne Potter, Administrator
Village at Legacy Pointe
1654 Holiday Crest Circle
Waukee, IA 50263

**RE: Final Complaint/Incident Investigation Report – Village at Legacy Pointe,
Waukee, IA**

Dear Ms. Potter:

Enclosed is the **Final Complaint/Incident Investigation Report** from the on-site monitoring visit of February 27, 2012, 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 515/281-7039.

Sincerely,

Rose Boccella

Rose Boccella
Program Coordinator
Adult Services Bureau

Enclosure

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IOWA DEPARTMENT OF INSPECTIONS AND APPEALS
Assisted Living Program
Final Complaint/Incident Investigation Report

Assisted Living Program:

The Village at Legacy Pointe
Yvonne Potter, Administrator
1654 Holiday Crest Circle
Waukee, IA 50263

Complaint/Incident Intake #:

#37712-C

Date of Complaint/Incident Investigation:

February 27, 2012

Monitor(s):

Joyce Kix, RN
Maribeth Freland, RN

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 below were provided by the Program at the time of the on-site visit.

<u>General Population Program</u>	
Number of tenants without cognitive disorder:	29
Number of tenants with cognitive disorder:	3
Total Population of Program at time of on-site	32
TOTAL census of Assisted Living Program	32

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

Complaint/Incident Investigation – The Complaint/Incident investigator(s) made the observations detailed in the following areas:

A. Tenant Rights

Complaint/Incident Allegation: It was alleged that tenants were asked to let staff clean their apartment as late as 9:00 p.m. on Sunday nights.

- **Monitoring Observation:** A group meeting was held with 15 tenants and one family member present. The tenants stated that staff members were assigned to clean some of their apartments on the 2:00 to 10:00 p.m. shift. Tenants reported there was not a specific time for the cleaning. One tenant stated that his/her apartment was cleaned during weekend hours but it was not a concern. All tenants present stated they were able to decline the cleaning if it was a problem. The Interim Registered Nurse stated that staff members were instructed to have all tasks completed by 6:00 p.m. and she had received no written complaints regarding the cleaning schedule.
- **Regulatory Insufficiency:** None noted.

B. Staffing

Complaint/Incident Allegation: It was alleged that the same staff members are passing medications, serving meals and cleaning. There were concerns about a staff person cleaning a toilet and then serving food.

- **Monitoring Observation:** Resident Council meeting minutes for 1-12-12 documented the tenants were advised of a new staffing concept utilizing universal workers who would provide all services of medications, cleaning, dining and personal cares. Another meeting held 1-30-12, explained in more detail how the universal worker concept works. Tenants were advised that most of the housekeeping would be

completed on second shift prior to 6:00 p.m. During interview, Staff #1, a universal worker, stated that she had been trained to practice universal precautions. She said she used an apron and cap in the kitchen and washed her hands prior to providing services to a tenant.

- Regulatory Insufficiency: None noted.

C. Occupancy Agreement

Complaint/Incident Allegation: It was alleged that staff members have stopped cleaning showers unless the tenant pays an extra fee.

- Monitoring Observation: The occupancy agreement which the tenants signed upon admission documented there may be charges for supplemental services not included in the monthly rate. The agreement directed an additional ten dollars per 15 minutes would be charged for additional housekeeping requests beyond light housekeeping.
- Regulatory Insufficiency: None noted.

D. Food Service

Complaint/Incident Allegation: It was alleged that although there has been some improvement, the food is poor.

- Monitoring Observation: The five week menu cycle provided by the Program was signed by a dietitian and included the daily requirement for nutrition in each day's menu. The minutes of the past three resident council meeting were reviewed. The only concern noted was a comment requesting less corn in the mixed vegetables. During a group meeting, several tenants voiced concerns that the food just was not plain enough for old people- too spicy, greasy, and too many slimy vegetables like zuchinni.
- Regulatory Insufficiency: None noted.