IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

HEALTH FACILITIES DIVISION
Lucas State Office Building
321 East 12th Street
Des Moines, IA 50319-0083
(515) 281-4115 Phone
(515) 242-5022 Fax

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

February 26, 2013

Ms. Judy Qualters, Administrator
Sunnybrook of Fairfield Assisted Living
3000 W. Madison
Fairfield, IA 52556

RE: Final Recertification Monitoring Evaluation Report – Sunnybrook of Fairfield, Fairfield, IA

Dear Ms. Qualters:

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) in response to the **Preliminary 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. The Final report is enclosed.

The review of the recertification documents you submitted has been completed and the documents are accepted. In addition, the State Fire Marshal's (SFM) inspection report has been received as well as the Facility Engineer's approval of the Evacuation Plans for your program.

Enclosed you will find the Assisted Living Program Certificate **S0170** with effective dates of **February 19, 2013** through **February 18, 2015**.

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:

Judy Qualters, Administrator
Sunny Brook of Fairfield Assisted Living
3000 W. Madison
Fairfield, IA 52556

Date of Monitoring Visit:

November 19, 2012

Monitor(s):

Hal L. Chase, RN BSN MPH

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:	49
Number of tenants with cognitive disorder:	0
Total Population of Program at time of on-site	49

Dementia-Specific Program by Dedication	
Number of tenants without cognitive disorder:	0
Number of tenants with cognitive disorder:	8
Total Population of Program at time of on-site	8
TOTAL census of Assisted Living Program	57

Tenant/Family Satisfaction Results – A community meeting was held with 38 tenants in attendance. Tenants reported the Program was their home. Housekeeping services were completed to their satisfaction and the building and grounds were safe, clean and sanitary. Nursing services were available when needed and staff was trained well and provided the cares needed. The food was good, with a variety of meats, fruits and vegetables offered at every meal. Tenants reported there were enough activities offered but would like to more activities during the weekend. Tenants felt safe, made their own decisions, were satisfied with the Program and would recommend the Program to anyone.

Program History – There were no regulatory insufficiencies during this recertification period.

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

A. Criteria for Exclusion of Tenants

Monitoring Observation: Four tenant files were reviewed. No issues were found with Tenants #1, #2, and #3.

Tenant #4, an 85 year old, was admitted on 9-8-12 and had diagnoses of: Atrial Fibrillation, Hyperlipidemia, Hypothyroidism, Gastro Esophageal Reflux Disease, Chronic Pain, Crohn's Disease, Depression, Rheumatoid Arthritis, Osteoarthritis and Edema.

A service plan of 9-18-12 and 10-11-12 indicated Tenant #4 needed standby assistance with activities of daily living (ADLs), including transfer, bathing, dressing, grooming, toileting, medication administration and used an assistive device of a walker for ambulation.

Staff #1, #3 and #4 were interviewed and reported Tenant #4's health status has declined.

Tenant #4 no longer ambulated with the use of a wheeled walker and required the use of a wheelchair routinely for mobility. Tenant #4 could not bear weight independently and required two staff to routinely transfer with all ADLs. Staff #1, #3 and #4 reported it was not safe to transfer Tenant #4 with one staff. Staff #3 reported Tenant #4 refused to ambulate. Tenant #4 has received physical therapy on two separate occasions, but refused treatment.

The Administrator reported she was aware of Tenant #4's change in health status and had talked with Tenant #4's family about possible transfer of Tenant #4 from the Program to a long term care facility.

The Program has a new registered nurse, who took over as the Program nurse as of 11-16-12. The Program nurse reported she had seen a decline in Tenant #4's health and functional status, but was not aware Tenant #4 was a routine two-staff assist with transfer.

During the monitoring visit, at approximately 1:00 p.m., a monitor observed staff transfer Tenant #4 from a wheelchair to the toilet and from the toilet to the wheelchair. Tenant #4 was unable to bear weight and was unable to pivot with the assist of two staff. Two staff were needed to safely transfer Tenant #4 both times. On 11-20-12 at approximately 7:30 a.m., a monitor observed staff transfer Tenant #4 from bed to a wheelchair. Two staff was needed to safely transfer Tenant #4.

Regulatory Insufficiency: A program shall not knowingly admit or retain a tenant who: (b) requires routine, two-person assistance with standing, transfer or evacuation. (IAC r. 481-69.23(b))

B. Nurse Review

Monitoring Observation: Tenants #1 and #4 received personal and health related cares, including Program administered medications. The Program completed functional, cognitive and health evaluations every three months as part of their 90-day nurse review, but did not consistently monitor program administered medications for adverse reactions.

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; (1) to monitor, at least every 90-days, or after a significant change in the tenant's condition, any tenant who receives program-administered prescription medications for adverse reactions to the medications and to make appropriate interventions or referrals, and to ensure that the prescription medications orders are current and that the prescription medications are administered consistent with such orders. (IAC r. 481-69.27(1))