IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

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RODNEY A. ROBERTS, DIRECTOR

May 2, 2013

Ms. Linda Judkins, Administrator
Rose of Council Bluffs
2306 Sherwood Drive
Council Bluffs, IA 51503

RE: Final Recertification Monitoring Evaluation Report – Rose of Council Bluffs, Council Bluffs, IA

Dear Ms. Judkins:

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 Request for Reconsideration has been denied due to a lack of any additional supportive documentation being provided by the program. 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 **S0318** with effective dates of **May 26, 2013** through **May 25, 2015**.

If you have any questions in regard to 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 Recertification Monitoring Evaluation Report

Assisted Living Program:

Rose of Council Bluffs
Linda Judkins, Administrator
2306 Sherwood Drive
Council Bluffs, IA 51503

Date of Monitoring Visit:

April 3, 2013

Monitor(s):

Joyce Kix, 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 were provided by the Program at the time of the on-site.

General Population Program	
Number of tenants without cognitive disorder:	73
Number of tenants with cognitive disorder:	3
Total Population of Program at time of on-site	76
TOTAL census of Assisted Living Program	76

Tenant/Family Satisfaction Results – A community meeting was held with 18 tenants. They reported the program staff members were friendly and respectful. The nursing services were great with quick response to calls. The food was generally good but there were isolated concerns mentioned. The tenants enjoyed activities but also felt there could be more selections offered. They felt safe at the program and would recommend it to others.

Program History – There were no regulatory insufficiencies identified during the past certification period.

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

A. Nurse Review

Monitoring Observation: Tenant #1, an 85 year old, was admitted 1-13-12 with diagnoses of: Hypertension, Gastro esophageal Reflux Disorder, Anxiety and Rheumatoid Arthritis. The cognitive assessment completed 2-18-13 indicated no impairment. An incident report dated 2-11-13 documented Tenant #1 fell striking his/her neck on the back of a chair. The tenant complained of neck pain. The clinical record lacked evidence of the program's Registered Nurse (RN) review of the fall with subsequent injury.

Tenant #3, a 90 year old, was admitted 12-2-11 with diagnoses of: Debility and Failure to Thrive. The cognitive assessment completed 1-16-13 indicated no impairment. During interview on 4-3-13 at approximately 2:00 p.m., the program Registered Nurse (RN) said that weight loss had been a concern for Tenant #3 since admission. The comprehensive assessment dated 1-16-13 lacked documentation of assessment of Tenant #3's weight. The Kitchen Manager stated during interview on 4-3-13 at 8:15 a.m. that Tenant #3 received a therapeutic diet with pureed meats. The program provided a physician's order dated 3-21-13 for pureed meats. The clinical record lacked evidence of a nurse review regarding this change in Tenant #3's status or the concern regarding potential further weight loss.

Regulatory Insufficiency: 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))

B. Evaluation of Tenant

Monitoring Observation: An incident report for Tenant #1 dated 2-11-13 documented Tenant #1 fell striking his/her neck on the back of a chair. The tenant complained of neck pain. The clinical record lacked evidence of the program's RN review of the fall with subsequent injury. The program provided a documentation of a skilled nurse visit completed by the home health agency (HHA) nurse on 2-26-13 which indicated a recommendation for an Aspen Collar to help keep Tenant #1's neck in alignment. The HHA nurse initiated the collar and trained the staff to apply and replace the collar as needed. The Service Plan initially implemented 1-31-13 included the addition of Physical Therapy, Occupational Therapy, assistance with bathing and grooming dated 2-22-13. The clinical record lacked evidence of completion of required comprehensive cognitive, health and functional evaluations with the change in Tenant #1's status.

During interview on 4-3-13 at approximately 2:00 p.m., the program RN said that weight loss had been a concern for Tenant #3 since admission. The Kitchen Manager stated during interview on 4-3-13 at 8:15 a.m. that Tenant #3 received a therapeutic diet with pureed meats. The program provided a physician's order dated 3-21-13 for pureed meats. The service plan signed 12-31-12 had been up-dated 3-21-13 with the directive for pureed meats. The clinical record lacked evidence of completion of comprehensive cognitive, health and functional evaluations for the change in Tenant #3's health status.

Regulatory Insufficiency: A program shall evaluate each tenant's functional, cognitive and health status within 30 days of occupancy. A program shall 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 with the tenant has not exhibited a significant change. (IAC r. 481-69.22(2))

C. Service Plan

Monitoring Observation: An incident report for Tenant #1dated 2-11-13 documented Tenant #1 fell striking his/her neck on the back of a chair. The tenant complained of neck pain. The clinical record lacked evidence of the program's RN review of the fall with subsequent injury. The program provided a documentation of a skilled nurse visit completed by the home health agency (HHA) nurse on 2-26-13 which indicated a recommendation for an Aspen Collar to help keep Tenant #1's neck in alignment. The HHA nurse initiated the collar and trained the staff to apply and replace the collar as needed. The service plan dated 1-31-13 lacked inclusion of the application of the collar.

The service plan for Tenant #3 was signed 12-31-12. The service plan included the direction for assistance with bathing three times a week. The RN provided a Home Care Aide (HCA) Plan of Care updated 2-25-13. The HCA plan directed staff to assist with personal care, perineal care, apply lotion to all extremities as requested and to assist with

dressing and undressing. The service plan had the addition of pureed meats on 3-21-13. The signed service plan of 12-31-12 documented Tenant #3 was independent with grooming and did not include specific interventions to meet the needs of Tenant #3.

Regulatory Insufficiency: A service plan shall be developed for each tenant based on the evaluations conducted in accordance with subrules 69.22 (1) and 69.22 (2) and shall be designed to meet the specific needs of the individual tenant. The service plan shall subsequently be updated at least annually and whenever changes are needed. (IAC r. 481-69.26 (1))