IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

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RODNEY A. ROBERTS, DIRECTOR

Complaint/Incident Intake #: 46369-I

January 30, 2014

Jackie Fletcher, Director
Wesley the Village
1203 North E Street
Indianola, IA 50125

RE: Final Complaint/Incident Investigation Report – Wesley the Village, Indianola, IA

Dear Ms. Fletcher:

Enclosed is the **Final Complaint/Incident Investigation Report** from the on-site monitoring visit of January 21, 2014, 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 or **Rose.Boccella@dia.iowa.gov**

Sincerely,

Rose Boccella

Rose Boccella
Program Coordinator
Adult Services Bureau

Enclosure

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

Assisted Living Program: **Complaint/Incident Intake #:** 46369-I

Jackie Fletcher, Director of Assisted Living
Wesley the Village
1203 North E Street
Indianola, IA 50125

Date of Complaint/Incident Investigation:

January 21, 2014

Monitor(s):

Margaret Kaltefleiter, RN MS

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.

General Population Program	
Number of tenants without cognitive disorder:	12
Number of tenants with cognitive disorder:	0
Total Population of Program at time of on-site	12
TOTAL census of Assisted Living Program	12

Program History – The program has not received any regulatory insufficiencies during this certification period.

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

A. Other

Complaint/Incident Allegation: The Program reported a tenant was missing money in August 2013.

- Monitoring Observation: Tenant #1, a 99 year old was admitted on 8-18-12 and diagnoses included: Chest Pain, Eczema, Dementia, Hypertension, Urinary Tract Infection, Hyperlipidemia, Increased Urine Output, Pain, Nasal Congestion, Bronchiectasis and Macular Degeneration. Tenant #1 was staged at a three on the Global Deterioration Scale which indicated mild cognitive decline. According to Tenant #1's service plan dated 5-13-13, Tenant #1 received assistance with medications, housekeeping and laundry. According to the Nurse's Notes dated 8-1-13, the Director entered Tenant #1's apartment to deliver medications. Tenant #1 followed her into the bathroom and nearly fell when Tenant #1 became unstable. The Director noticed a pair of underwear in the sink that had a 20 cm x 20 cm of bright red blood stain. The Director called Tenant #1's doctor and Tenant #1 went to the Emergency Room (ER) for evaluation. Upon Tenant #1's return, Tenant #1 was admitted to the health center and never returned to Tenant #1's apartment in the Assisted Living Program.

  According to an Incident Report dated 8-2-13, Tenant #1 returned to the health center. A nurse called the Director to pick up Tenant #1's purse and return the purse to Tenant #1's apartment. The money in the purse was counted and there was $68 plus change. The Director returned the purse to the area where she had obtained it prior to Tenant #1 going to the ER the day before, under a pillow next to a dresser.

  From 8-23-13 to 8-25-13, Tenant #1's family arrived to assist with vacating Tenant #1's apartment due to Tenant #1's permanent move to the health center. On 8-26-13

the health center nurse called the Director and stated there was only a few one dollar bills, plus some change, in Tenant #1's purse. The Director stated she locked Tenant #1's apartment after returning the purse to the apartment. She was unaware of anyone entering the apartment between 8-2-13 and 8-23-13 when family entered to pack Tenant #1's belongings. The Director stated there was a set of room keys that staff had access to use at any time, but staff would not have had any reason to enter Tenant #1's apartment. She also was not aware of any reason maintenance or housekeeping staff would have needed to enter the apartment.

Staff #1 stated she had never witnessed any money being taken. She was not aware of any tenants reporting any missing items.

An Incident Report was completed and the Department was notified.

Review of Tenant #1's file, review of the incident report and interviews with staff and the Director indicated it was not possible to determine the cause of the missing money.

- Regulatory Insufficiency: None noted.