IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

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Complaint/Incident Intake #: 47662-C

June 18, 2014

Ms. Kimberly Wellauer, Executive Director
Eiler Place Assisted Living
920 West Garfield
Clarinda, IA 51632

RE: Final Complaint/Incident Investigation Report – Eiler Place Assisted Living, Clarinda, IA

Dear Ms. Wellauer:

Enclosed is the **Final Complaint/Incident Investigation Report** from the on-site monitoring visit of June 10, 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 515/281-4116 or **James.Berkley@dia.iowa.gov**

Sincerely,

Jim Berkley

Jim Berkley
Program Coordinator
Adult Services Bureau

Enclosure

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

Assisted Living Program:

Kimberly Wellauer, Executive Director
Eiler Place Assisted Living
920 West Garfield
Clarinda, IA 51632

Complaint/Incident Intake #: 47662-C

Date of Complaint/Incident Investigation:

June 10, 2014

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

General Population Program	
Number of tenants without cognitive disorder:	24
Number of tenants with cognitive disorder:	4
Total Population of Program at time of on-site	28
TOTAL census of Assisted Living Program	28

Program History – There were regulatory insufficiencies in the areas of Record Check, Tenant Rights, Tenant Documents, Evaluations, Service Plans, Admission and Discharge Criteria, Medications, Nurse Review, Policy and Procedure, Staffing, Food Service and Mandatory Reporting to the Department during this recertification period

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

A. Medications

Complaint/Incident Allegation: It was alleged insulin was not given correctly which resulted in a tenant having high blood sugars.

- Monitoring Observation: The program was asked to identify tenants who were diabetic. The program provided a list of 11 tenants, four who were assisted by the program with diabetic medications. Three tenants were selected for review from the list, Tenants #1, #2, and #3.

  Tenant #1, a 70 year-old, was admitted on 7-5-11 and had diagnoses of: Depressive Disorder, Anxiety, Hypertension, Diabetes, Gastroesophageal Reflux Disease, and Restless Legs Syndrome. On the Mini Mental Exam completed 2-8-14 Tenant #1 scored 18 of 30 which correlated to a Global Deterioration Score of four which would indicate moderate cognitive decline. The service plan of 2-10-14 indicated Tenant #1 received program assistance with insulin.

  Blood glucose records and Medication Administration Records (MARs) were reviewed for April and May 2014 and June 2014 through the date of the onsite visit. Lantus Insulin was administered regularly every morning and sliding scale Novolog Insulin was administered based on blood sugar results before every meal. Documentation was completed and there were no missed doses of insulin. Sliding scale insulin was administered correctly. The MARs did not indicate any adjustments to the insulin dosages were made by the physician.

Tenant #2, a 90 year-old, was admitted on 5-30-12 and had diagnoses of: Osteoarthritis and Diabetes. According to the service plan of 12-19-13, Tenant #2 was independent with medications including injectable diabetic medications. According to the service plan, Tenant #2 ordered his/her own medications from the pharmacy. Tenant #2 was also independent with blood sugar checks.

Tenant #3, a 69 year-old, was admitted on 12-2-13 and had diagnoses of: Diabetes, Chronic Obstructive Pulmonary Disease, Congestive Heart Failure, and Bipolar Disorder. According to the service plan of 3-26-14, Tenant #3 received assistance from the program with blood sugar checks and insulin administration. A review of the clinical record documented the program had contacted the physician with blood sugar results and insulin orders were changed. The MAR documented the changes in the orders.

The blood sugar results and the MARs were reviewed for April and May 2014 and June 2014 through the date of the onsite visit. The MARs documented the insulin was given and blood sugars were checked.

Clinical records were reviewed for three tenants who were diabetic. The clinical records documented medications given appropriately and the physician contacted as needed.

- Regulatory Insufficiency: None noted.

B. Food Service

Complaint/Incident Allegation: It was alleged the food tasted terrible.

- Monitoring Observation: The program provided documentation of a current food license and current menus signed by a dietitian. Staff #1 was identified as a Professional Food Manager. Staff #1 reported she had interviewed tenants and adjustments were being made to the menus and the dietitian was consulted about the changes.

  Ten tenants were interviewed. The majority of the tenants reported the food was "ok" to good. Only two tenants stated the food was not always good.

  According to the Regional Nurse a tenant had requested changes to the menu and the way foods were cooked. The Regional Nurse reported the program had been working with the tenant to make changes.

  The program was asked to provide the survey with sample portions of foods served during the noon meal on the day of the monitoring visit. The foods provided were those listed on the menu for the day.

  The surveyor sampled cottage cheese and fresh cantaloupe, leaf lettuce, corn bread and chili. The chili consisted of meat, beans, and sauce. The foods were

appropriately warm or cold depending on the food, and the food had flavor. The meat and beans were cooked.

The surveyor observed the dining room during the noon meal. Tenants were eating the food and were offered choices in food selection.

There was no evidence to suggest the food was terrible.

- Regulatory Insufficiency: None noted.