Iowa Department of Inspections and Appeals
Assisted Living Program
Re-certification Monitoring Evaluation Report

Assisted Living Program:

Beehive Home Assisted Living
Randy Van Roekel, RN Administrator
1126 Oak Hill Drive
Hawarden, IA 51023

Date of Monitoring Visit:

September 20, 2004

Monitor(s):

Hal L. Chase, RN, BSN, MPH
Charlotte Kemp, RN, MS

Definitions:

The following definitions are relevant:

Regulatory Insufficiency - A violation of a statutory or rule provision within the Iowa Code or 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 rule violations [321 IAC 25.8(3)]. The plan should identify how, and by a specific date, an insufficiency will be corrected. The plan is due to DIA within ten (10) working days of the program's receipt of a Re-certification Monitoring Evaluation Report. Depending on the circumstances, DIA may re-visit the assisted living program to confirm progress in fulfilling a plan's corrective measures.

Dementia-specific assisted living program - An assisted living program certified under this chapter that either serves five or more tenants with dementia or cognitive disorder staged between 4 and 7 on the Global Deterioration Scale or holds itself out as providing specialized care for persons with cognitive disorder or dementia, such as Alzheimer's disease, in a dedicated setting.

Overview:

An on-site monitoring evaluation was conducted at Beehive Home Assisted Living, Hawarden, IA on September 20, 2004. This re-certification on-site monitoring evaluation was conducted in conjunction with the complaint on-site visit, intake #7983. In preparing this report, the following information was considered:

Current Program Census:

General Population Program GPP **– A program that is not a Dementia Specific program, but may have tenants with cognitive disorder.**

Current number of tenants without cognitive disorder:	4
Current number of tenants with cognitive disorder:	1
Total General Population:	5

Dementia Specific Program – Not applicable.

Accreditation Status – Not applicable.

Complaint History – There were no complaints filed this certification period.

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

A. Service Plan – Program has an individualized service plan developed and updated for each tenant as required. [321 IAC 25.28]

Monitoring Observation: Three of three tenant files were reviewed and indicated service plans were not updated at least yearly and upon return from hospitalization. The service plans did not identify expected outcomes nor were they signed by the tenant or the tenant's legal representative.

- Regulatory Insufficiency: Program did not update service plans at least yearly and when changes occurred in the tenant's health status.

- Regulatory Insufficiency: Program did not develop service plans with expected outcomes nor were they signed by the tenant or the tenant's legal representative.

B. Nurse Review - Program provides a registered nurse to ensure the appropriate administration and documentation of medications, ensure that physician orders are current, and assess and document the tenants' health related activities. [321 IAC 25.30]

Monitoring Observation: Two of three tenant files reviewed indicated the program RN is not conducting a 90-day review of tenants receiving medication administration and health-related care. Physician orders were not correctly timed, dated, and signed by the RN.

- Regulatory Insufficiency: Program RN did not conduct appropriate assessments of tenants receiving medication administration and health-related care and ensure physician orders are current noting time, date, and signature.

C. Staffing - The provisions of this section address the program's staffing and training practices and associated documentation in responding to the identified needs of the tenant. [321 IAC 25.33]

Monitoring Observation: Staff interviews indicated there is not enough adequate staff available to provide the level of services needed for each tenant. Staff reported that tenants are not given a choice of when they can be assisted with bathing and staff are not available to assist with baths when tenants would prefer them.

- Regulatory Insufficiency: Program is not providing sufficiently trained staff at all times to fully meet the tenant's identified needs.

Dated this 29th day of September, 2004.