FORM APPROVED

DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	S0102	A. BUILDING: _____ B. WING _____	C 06/13/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OAKHILL ASSISTED LIVING HOME	1126 OAK HILL DRIVE HAWARDEN, IA 51023

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	481-67 Initial Comments	A 000		

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: 7
Number of tenants with cognitive disorder: 2
Total Population of Program at time of on-site: 9

TOTAL census of Assisted Living Program: 9

During the recertification to determine compliance with certification of an Assisted Living Program and complaint investigation 67984-C, the following regulatory insufficiencies were cited.

A 118	481-67 19(3) Record Checks	A 118		

481-67.19(135C,231B,231C,231D) Criminal, dependent adult abuse, and child abuse record checks.

67.19(3) Requirements for employer prior to employing an individual. Prior to employment of a person in a program, the program shall request that the department of public safety perform a criminal history check and the department of human services perform child and dependent adult abuse record checks of the person in this state.

This REQUIREMENT is not met as evidenced by:
Based on interview and record review the

All new employees will have criminal background checks prior to employment. Potential employees that have previously left employment at our facility will have another criminal background check prior to returning to our facility. Criminal background checks will be completed by the house manager and/or administrator.

Staff A criminal background check has been completed and is awaiting return. Criminal background check will be put into employee file upon return.

07/20/2017

DIVISION OF HEALTH FACILITIES - STATE OF IOWA
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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A 118	Continued From page 1 Program failed to complete criminal history and abuse registry checks prior to employment for 1 of 3 staff reviewed (Staff A). Findings follow: Record review on 6/13/17 revealed the Program hired Staff A on 1/26/17. The Manager explained Staff A had been hired back after resigning in April 2016 and she didn't think she needed to re-do record checks. During an interview the Manager confirmed the Program failed to complete required checks prior to employment of Staff A.	A 118		
A 033	481-69.21(3) Occupancy Agreement 481-69.21(231C) Occupancy agreement. 69.21(3) The occupancy agreement shall be reviewed and updated as necessary to reflect any change in services or financial arrangements. This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program failed to ensure the Occupancy Agreement (OA) included all of the required information within the agreement or in supporting documents/attachments. This potentially affected 9 of 9 tenants (Tenants #1-9). Finding follows: Record review on 6/13/17 revealed a letter to the "Residents of Oakhill" dated 3/30/17. The letter described a review of pricing structure and an increase in rates as of May 1, 2017. Further review of the letter revealed no signatures of acknowledgement of the rate increases from tenants and/or powers of attorneys for tenants (POA).	A 033	A signed attachment by tenant/POA will be included with occupany agreement when there is a change in financial arrangements. A review of current tenant charts will be completed by House Manager and/or Administrator for compliance within 30 days. For all new tenant admissions this will be implemented immediately.	07/20/2017

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A 033	Continued From page 2 Further review revealed the OA and/or supporting documents did not include all criteria for admission and retention of tenants. When interviewed on 6/13/17 at 1:30 p.m. the Administrator explained this letter was sent to tenants and POAs but the Program did not update the OA to include the rate increase information. She confirmed the Program failed to update tenant OAs when the Program increased rates and program rules changed to include an additional admission/retention criteria.	A 033		
A 036	481-69.22(1) Evaluation of Tenant 481-69.22(231C) Evaluation of tenant. 69.22(1) Evaluation prior to occupancy. A program shall evaluate each prospective tenant's functional, cognitive and health status prior to the tenant's signing the occupancy agreement and taking occupancy of a dwelling unit in order to determine the tenant's eligibility for the program, including whether the services needed are available. The cognitive evaluation shall utilize a scored, objective tool. When the score from the cognitive evaluation indicates moderate cognitive decline and risk, the Global Deterioration Scale shall be used at all subsequent intervals, if applicable. If the tenant subsequently returns to the tenant's mildly cognitively impaired state, the program may discontinue the GDS and revert to a scored cognitive screening tool. The evaluation shall be conducted by a health care professional or human service professional. This REQUIREMENT is not met as evidenced	A 036	All new potential tenants will have a function, health, and cognitive screening prior to admission to the program. These screenings will be repeated at 30 days, 90 days(if applicable), annually, and with any decline in status or significant change. These screenings will be completed by the health care professional and/or human service professional.The program will continue to utilize the cognitive mini mental assessment unless it is indicated that a moderate cognitive decline in which the Global Deteroration Scale shall be implemented. If tenant status improves the mini mental assessment will be used. All tenant charts will be reviewed by House Manager for compliance within 30 days.	07/20/2017

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A 036	Continued From page 3	A 036		

by:
Based on interview and record review the Program failed to consistently complete functional evaluations prior to admission. This affected 1 of 1 tenants reviewed (Tenant #1). Finding follows:

Record review on 6/13/17 revealed the Program admitted Tenant #1 on 10/1/16. No functional assessment dated prior to admission could be located.

When interviewed on 6/13/17 at 1:30 p.m. the Manager and Administrator confirmed no functional assessment dated prior to admission could be located for Tenant #1.