

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

Complaint Intake #: 35266-C

September 13, 2011

Ms. Anita Zemba-Schadt, Director
Petersen Commons
1607 West 12th Street
Davenport, IA 52804

RE: Final Complaint Investigation Report – Petersen Commons, Davenport, IA

Dear Ms. Schadt:

Enclosed is the **Final Complaint Investigation Report** from the on-site monitoring visit of September 7, 2011, 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.

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:

Complaint/Incident Intake#: 35266-C

Anita Zemba-Schadt, Director
Petersen Commons
1607 West 12th Street
Davenport, IA 52804

Date of Complaint/Incident Investigation:

September 7, 2011

Monitor(s):

Stephanie Cummins, MA
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.

<u>Dementia-Specific Program by Definition</u>	
Number of tenants without cognitive disorder:	43
Number of tenants with cognitive disorder:	5
Total Population of Program at time of on-site	48
TOTAL census of Assisted Living Program	48

Program History –The program received regulatory insufficiencies during this certification period in the areas of Evaluation of Tenants, Service Plan, Medications and Nurse Review.

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

A. Tenant Rights

Complaint/Incident Allegation: It was alleged a tenant appeared insulted after an interaction with an administrative staff member.

- **Monitoring Observation:** Four tenant files were reviewed and did not reveal any concerns related to tenant rights. Incident reports were reviewed and did not reveal any concerns related to tenant rights.

A community meeting was held by Administrative staff of the Program on 8-30-11 with 36 tenants and five family members. No concerns were voiced regarding tenant rights.

A “Tenants Rights and Responsibilities Policy” was reviewed that stated the Program supports the establishment and protection of tenant’s rights to effectively provide all rights to tenants.

Three tenant interviews were conducted. Tenant #1(the Tenant) stated it was a good place to live and staff provided good cares. The Tenant stated there was no trouble with staff and he/she was treated well by everyone, including the Director, nurses and all staff. The Tenant stated staff was respectful and had no issues in regards to violation of tenant rights. The Tenant could not think of anything that could be implemented as an improvement. The Tenant felt safe living at the Program.

Tenant #2 (the Tenant) stated he/she really liked living there, the food was good and was served three times a day. The Tenant stated staff treated him/her well and had no concerns or complaints.

Tenant #3 (the Tenant) stated he/she loved living there, loved the apartment and felt it was perfect. The food was excellent, with many choices offered. The Tenant could not think of any suggestions for improvement. The Tenant stated it was a good place, well run, and felt safe living there. The Tenant appreciated meetings in which tenants were listened to and questions were answered. The Tenant stated staff was good and the Director was very helpful and efficient. The Tenant attended a meeting where tenant rights were explained and had no issues with tenant rights being violated.

The Director and Nurse stated there was enough staff to meet the needs of the tenants and there were no tenants who exceeded the level of care. They stated tenant rights were upheld in the building, they had not witnessed any administrative staff acting inappropriately towards a tenant nor had anyone violated a tenant's rights. The Director and Nurse had no concerns regarding administrative staff and interactions with tenants. The Director stated some tenants had requested assigned seating in the dining room but the Program advocated open seating and would not allow assigned seating. The Nurse stated she could not recall a time when tenants voiced concerns with tenant rights.

- Regulatory Insufficiency: None noted.

Dated this 8th day of September, 2011.