IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

July 9, 2008

Complaint #17858

Christine Vasquez, Administrator
Walden Point Assisted Living
1200 4th St
Des Moines, IA 50314-3102

RE: Recertification Monitoring Report and Complaint Investigation Report, Walden Point, Des Moines, IA

Dear Ms. Vasquez:

Enclosed is the **Complaint Investigation Report** completed by the Department of Inspections and Appeals (DIA) in accordance with the Code of Iowa, section 231C.7, Iowa Administrative Code, chapter 25, pertaining to assisted living programs and, chapter 26, pertaining to monitoring, civil penalties and complaints regarding assisted living programs. **No Regulatory Insufficiencies were identified.**

A copy of the monitor's **Complaint Investigation Report** is enclosed for your information and as a record of the result of this investigation.

If you have any questions regarding this Report, please contact me at 515-281-5003

Sincerely,

Connie Schaffer

Connie Schaffer
Certification Coordinator – Central Iowa
Health Facilities Division
Adult Services Bureau

Enclosure

Iowa Department of Inspections and Appeals
Assisted Living Program
Final Complaint and Re-Certification Investigation Report

Assisted Living Program:

Christine Vasquez, Administrator
Walden Point Assisted Living
1200 4th St
Des Moines, IA 50314-3102

Complaint Intake #: 17858

Date of Investigation:

June 11, 20008

Monitor(s):

Hal L. Chase, RN BSN MPH

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 26.2(5)(a)]. 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 Complaint Investigation Report. Depending on the circumstances, DIA may revisit 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 321 IAC - chapter 25 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 special care for persons with cognitive disorder or dementia, such as Alzheimer's disease, in a dedicated setting.

Overview:

A complaint and recertification investigation on-site visit was conducted at Walden Point Assisted Living on June 11, 2008. 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	58
Current number of tenants with cognitive disorder	0
Total Population:	58

*Dementia Specific Program (DSP)** – Not applicable.

***These are the census numbers represented by the program to be applicable at the time of the on-site.**

Tenant/Family Satisfaction Results – A community meeting was held with 23 tenants attending. Tenants stated they recently had water in the dining room from all the rain over the last few days, and staff made every effort to minimize any disruptions during meal times. Tenants stated staff are good to them, responsive when called and are trained for cares given; however, they felt an RN should be at the program on weekends. Tenants complained of waiting more than 30 minutes on a weekend for an RN to arrive after staff have called for an RN to assess tenants. Tenants stated the food was good and they are given a variety of entrees, fruits and vegetables. Tenants stated the program only offered lunch and supper and usually followed the published menu. Tenants stated there were enough activities offered but they would like to have more trips offered to events in the community Tenants stated they are receiving the cares they needed and make their own decisions. Tenants stated they are generally satisfied with the program and would recommend it to friends and family

Accreditation Status – Not applicable.

Program History – There have been substantiated regulatory insufficiencies in the areas of Staffing, Service Plan and Nurse Review during this certification period.

Complaint Investigation – The complaint investigator(s) made the observations detailed in the following areas.

A. Food Service – Program shall provide or coordinate with other community providers to provide hot or other appropriate meal(s) at least once a day or make arrangements for the availability of meals. Menus shall be appropriately planned. If applicable, therapeutic diets shall meet all requirements. Food preparation personnel shall meet all requirements. [321 IAC 25.32]

Complaint Allegation: It is alleged there is not enough variety with the evening meal.

- Monitoring Observation: Twenty three tenants stated the food always tasted good and they were given a variety of entrees, fruits and vegetables. Tenants stated the program usually followed the published menu. Two tenants interviewed privately stated the food was good. One tenant stated "not everyone likes the food but you can't please everyone." Staff #1, #2 and #3 stated the menus given to tenants are followed and tenants haven't complained to them about the food served. A review of the menus for a two week period indicated a different entrée, vegetable and dessert for lunch and supper.

- Regulatory Insufficiency: None noted.

B. 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]

Complaint Allegation: It is alleged Tenant #1 laid on the floor for hours and staff did not check on the tenant until supper

- Monitoring Observation: Tenant #1, a 77 year old, was admitted on 8-6-07 and has diagnoses of: Diabetes Mellitus II, Hypertension and Cardiovascular Disease. Service plan of 5-27-08 indicated the tenant is assisted with blood sugar checks and medication administration, but is independent with toileting, bathing, grooming, ambulation, transfer and mobility A functional, cognitive and health evaluation of 5-27-08 indicated the tenant had fallen on two separate occasions when getting up in the middle of the night to toilet. The program recorded on the functional and health evaluation the tenant stated he/she went to bed at 10:30 p.m, woke up on the floor in the bathroom at 5:30 a.m. and no injury was noted. The tenant was seen by his/her physician for examination. Service plan was updated on 5-27-08 as the tenant is being evaluated on 5-28-08 for physical therapy following increased falls. Staff #1, #2 and #3 stated they were not aware of the tenant having a history of falls, not aware of the tenant falling or being found on the floor

- Regulatory Insufficiency: None noted.

C. Activities – The program provides appropriate programming for tenants based on individual interests. Programming shall support the service plans, be consistent with the program statement and occupancy policies, and available in writing as required. [321 IAC 25.39]

Complaint Allegation: It is alleged there are no planned activities for tenants.

- Monitoring Observation: The Activities Director stated she is employed full-time and provides scheduled activities for tenants. The Activities Director provided a copy of

scheduled events for the months of May and June 2008. Upon entering the program it was noted a calendar of scheduled activities was placed in the community room of the program. Two tenants interviewed privately stated there were scheduled activities and the activities director is always offering something new

- Regulatory Insufficiency: None noted.

Dated this 10th day of July 2008