Regulatory Analysis

Notice of Intended Action to be published: 481—Chapter 70
"Adult Day Services"

Iowa Code section(s) or chapter(s) authorizing rulemaking: 231D.2
State or federal law(s) implemented by the rulemaking: Iowa Code section 231D.2 and Executive Order 10

Public Hearing

A public hearing at which persons may present their views orally or in writing will be held as follows:

November 4, 2025 1:30 p.m.	Ledges Conference Room 6200 Park Avenue Des Moines, Iowa

Information on virtual participation will be available on the Department of Inspections, Appeals, and Licensing's website prior to the hearing.

Public Comment

Any interested person may submit written or oral comments concerning this Regulatory Analysis, which must be received by the Department no later than 4:30 p.m. on the date of the public hearing. Comments should be directed to:

Amy K. Oetken
Department of Inspections, Appeals, and Licensing
6200 Park Avenue
Des Moines, Iowa 50321
Phone: 515.672.4929
Email: amy.oetken@dia.iowa.gov

Purpose and Summary

The proposed rulemaking repromulgates Chapter 70 and implements Iowa Code section 231D.2 in accordance with the goals and directives of Executive Order 10. Iowa Code section 231D.2 indicates that the Department is to establish a program for certification and monitoring of complaint investigations related to adult day services.

The rulemaking implements the above Iowa Code section by setting forth the various certification and recertification processes. The rulemaking describes the evaluation needed for participants and lists the occupancy agreement terms, as well as the criteria for admission and retention of participants and necessary participant documents. The rules list how to involuntarily discharge a participant from the program. The rulemaking sets staffing requirements, along with structural standards and life safety protocols.

Analysis of Impact

1. **Persons affected by the proposed rulemaking:**

- **Classes of persons that will bear the costs of the proposed rulemaking:**

The program owners and administrators will bear the costs of the proposed rulemaking by complying with the requirements to maintain the program. Those costs are associated with running safe and effective programs.

- **Classes of persons that will benefit from the proposed rulemaking:**

The participants in adult day service programs will benefit from the rulemaking by receiving safe and effective services. Their loved ones will benefit from the peace of mind of knowing the participants are cared for.

2. **Impact of the proposed rulemaking, economic or otherwise, including the nature and amount of all the different kinds of costs that would be incurred:**

- **Quantitative description of impact:**

The adult day service programs will be impacted by having to comply with the policies and procedures established by the rulemaking. The costs will vary by program and are difficult to predict. The facilities will have to provide adequate staffing and appropriate facilities. It is difficult to determine those costs.

- **Qualitative description of impact:**

The qualitative impact of this rulemaking is that it provides safe and adequate care to participants and peace of mind to their loved ones.

3. **Costs to the State:**

- **Implementation and enforcement costs borne by the agency or any other agency:**

The Department incurs the statutorily required costs to implement and enforce the rulemaking. The Acute & Continuing Care (ACC) and Long Term Care (LTC) bureaus implement multiple Iowa Code and Iowa Administrative Code chapters related to health facilities, including this chapter. ACC and LTC have an estimated combined FY 2025 budget of $16,020,287 that covers more than 70 full-time equivalent (FTE) positions working with over 500 licensed health facilities. There are 26 adult day service programs in Iowa. Six full-time employees work with the program and helped to collect $8,000 in licensing fees.

- **Anticipated effect on State revenues:**

The anticipated effect on State revenues is minimal, as shown by the small amount collected for licensing fees.

4. **Comparison of the costs and benefits of the proposed rulemaking to the costs and benefits of inaction:**

Adult day services serve persons with functional impairment. That population is vulnerable and deserves protection. Iowa Code chapter 231D promotes safe and adequate care for the individuals who enroll in adult day services. These rules are intended to aid in achieving that goal. The benefits justify the costs. Furthermore, there were no fines issued in FY 2024, which shows the effectiveness of the program.

5. **Determination whether less costly methods or less intrusive methods exist for achieving the purpose of the proposed rulemaking:**

Making this chapter less restrictive would undermine the goals of Iowa Code chapter 231D, which are to promote and encourage adequate and safe care for adults with functional impairments. The persons served by adult day services are vulnerable and the rules as promulgated serve to protect that population.

6. **Alternative methods considered by the agency:**

- **Description of any alternative methods that were seriously considered by the agency:**

See the answer to section 5 above.

- **Reasons why alternative methods were rejected in favor of the proposed rulemaking:**

See the answer to section 5 above.

Small Business Impact

If the rulemaking will have a substantial impact on small business, include a discussion of whether it would be feasible and practicable to do any of the following to reduce the impact of the rulemaking on small business:

- Establish less stringent compliance or reporting requirements in the rulemaking for small business.
- Establish less stringent schedules or deadlines in the rulemaking for compliance or reporting requirements for small business.
- Consolidate or simplify the rulemaking's compliance or reporting requirements for small business.
- Establish performance standards to replace design or operational standards in the rulemaking for small business.
- Exempt small business from any or all requirements of the rulemaking.

If legal and feasible, how does the rulemaking use a method discussed above to reduce the substantial impact on small business?

Adult day programs are of different sizes. The need to protect the participants of those programs is the same no matter the size of the facility. Iowa Code chapter 231D does not allow for exemptions or different standards for small organizations. The necessity for consistency and fairness is the same whether the program is small or large. Notwithstanding, if a small organization identifies a portion of the rulemaking that is overly burdensome and the goals can be accomplished in a manner that would reduce the impact of the rulemaking to the organization, the Department's established waiver process could be utilized.

Text of Proposed Rulemaking

ITEM 1. Rescind 481—Chapter 70 and adopt the following **new** chapter in lieu thereof:

CHAPTER 70
ADULT DAY SERVICES

481—70.1(231D) Definitions. In addition to the definitions in 481—Chapter 67 and Iowa Code chapter 231D, the following definitions apply:

"Applicable requirements" means Iowa Code chapter 231D, this chapter, 481—Chapter 67 and includes any other applicable administrative rules and provisions of the Iowa Code.

"CARF" means the Commission on Accreditation of Rehabilitation Facilities.

"Cognitive disorder" means a disorder characterized by cognitive dysfunction presumed to be the result of illness that does not meet criteria for dementia, delirium, or amnestic disorder.

"Dementia-specific adult day services program" means an adult day services program certified under this chapter that:

1. Serves fewer than 55 participants and has 5 or more participants who have dementia between Stages 4 and 7 on the Global Deterioration Scale, or
2. Serves 55 or more participants and 10 percent or more of the participants have dementia between Stages 4 and 7 on the Global Deterioration Scale, or
3. Holds itself out as providing specialized care for persons with dementia, such as Alzheimer's disease, in a dedicated setting.

"Maximal assistance with activities of daily living" means routine total dependence on staff for the performance of a minimum of four activities of daily living for a period that exceeds 21 days.

"Medically unstable" means that a participant has a condition or conditions:

1. Indicating physiological frailty as determined by the program's staff in consultation with a physician or physician extender;

2. Resulting in three or more significant hospitalizations within a consecutive three-month period for more than observation; and

3. Requiring frequent supervision of the participant for more than 21 days by a registered nurse.

For example, a participant who has a condition such as congestive heart failure that results in three or more significant hospitalizations during a quarter and that requires that the participant receive frequent supervision may be considered medically unstable.

"Unmanageable incontinence" means a condition that requires staff provision of total care for an incontinent participant who lacks the ability to assist in bladder or bowel continence care.

"Visiting day(s)" means up to 16 hours in a two-day period during which a person may visit a program prior to admission for the purpose of assessing eligibility for the program and personal satisfaction.

481—70.2(231D) Program certification. A program may obtain certification by meeting all applicable requirements or voluntarily accredited by a recognized accreditation entity.

70.2(1) *Posting requirements.* A program's current certificate shall be visibly displayed within the designated operation area of the program. The latest monitoring report, fire safety bureau report, and food establishment inspections report issued pursuant to Iowa Code chapter 137F shall be made available to the public by the program upon request.

70.2(2) *Dementia-specific programs.* If a program meets the definition of a dementia-specific adult day services program during two sequential certification monitorings, the program shall meet all requirements for a dementia-specific program, including the requirements set forth in rule 481—70.30(231D) and in subrule 70.32(2).

481—70.3(231D) Certification of a nonaccredited program—application process.

70.3(1) The applicant shall complete an application packet obtained from the department health facilities division website at dia-hfd.iowa.gov; by mail from the Department of Inspections, Appeals, and Licensing, Adult Services Bureau, 6200 Park Avenue, Des Moines, Iowa 50321; or by telephone at 515.281.7272.

70.3(2) The applicant shall submit one copy of the completed application and all supporting documentation to the department at the above address at least 90 calendar days prior to the expected date of beginning operation.

481—70.4(231D) Nonaccredited program—application content. An application for certification or recertification of a nonaccredited program shall include the following:

70.4(1) The names, addresses, and percentage of stock, shares, partnership or other equity interest of all officers, members of the board of directors and trustees, as well as stockholders, partners or any individuals who have greater than a 10 percent equity interest in each of the following, as applicable:

a. The real estate owner or lessor;

b. The lessee;

c. The management company responsible for the day-to-day operation of the program.

The program will notify the department of any changes in the list no later than ten working days after the effective date of the change.

70.4(2) A statement disclosing whether the individuals listed in subrule 70.4(1) have been convicted of a felony or an aggravated or serious misdemeanor or found to be in violation of the child abuse or dependent adult abuse laws of any state.

70.4(3) A statement disclosing whether any of the individuals listed in subrule 70.4(1) fall under the provisions in Iowa Code section 231D.5, including for a licensed health care facility as defined in Iowa Code section 135C.1 or a licensed hospital as defined in Iowa Code section 135B.1.

70.4(4) The contractual agreement and all attachments.

70.4(5) If the program contracts for personal care or health-related care services from a certified home health agency, a mental health center or a licensed health care facility, a copy of that entity's current license or certification.

70.4(6) A copy of the state license for the entity that provides food service, whether the entity is the program or an outside entity or a combination of both.

70.4(7) The fee set forth in Iowa Code section 231D.4.

481—70.5(231D) Initial certification process for a nonaccredited program.

70.5(1) Upon receipt of all completed documentation, including building code and fire safety bureau approval and structural and evacuation review approval, the department will determine whether the proposed program meets applicable requirements.

70.5(2) If the department determines the proposed program meets the requirements for certification, a provisional certification will be issued to the program to begin operation and accept participants.

70.5(3) Within 180 calendar days following issuance of provisional certification, the department will conduct a monitoring to determine the program's compliance with applicable requirements.

70.5(4) If a regulatory insufficiency is identified as a result of the monitoring, the process in rule 481—67.10(17A,231B,231C,231D) will be followed.

70.5(5) The department will make a final certification decision based on the results of the monitoring and review of an acceptable plan of correction.

70.5(6) The department will notify the program of a final certification decision within ten working days following the finalization of the monitoring report or receipt of an acceptable plan of correction, whichever is applicable.

70.5(7) If the decision is to continue certification, the department will issue a full two-year certification effective from the date of the original provisional certification.

481—70.6(231D) Expiration of the certification of a nonaccredited program. Unless conditionally issued, suspended or revoked, certification of a program will expire at the end of the time period specified on the certificate.

481—70.7(231D) Recertification process for a nonaccredited program. To obtain recertification, a program shall:

70.7(1) Submit one copy of the completed application, associated documentation, and the recertification fee as listed in Iowa Code section 231D.4 to the department at the address stated in subrule 70.3(1) at least 30 calendar days prior to the expiration of the program's certification.

70.7(2) Submit additional documentation that each of the following has been inspected by a qualified professional and found to be maintained in conformance with the manufacturer's recommendations and nationally recognized standards: heating system, cooling system, water heater, electrical system, plumbing, sewage system, artificial lighting, and ventilation system; and, if located on site, garbage disposal, kitchen appliances, washing machines and dryers, and elevators.

481—70.8(231D) Notification of recertification for a nonaccredited program.

70.8(1) The department will review the application, associated documentation and fees. After all finalized documentation is received, including building code and fire safety bureau approval, the department will determine the program's compliance with applicable requirements.

70.8(2) If the facility is in good standing, the department will issue the program a two-year certification effective from the date of the expiration of the previous certification.

481—70.9(231D) Certification or recertification of an accredited program—application process. An applicant for certification or recertification of a program accredited by a recognized accrediting entity shall:

70.9(1) Submit a completed application packet obtained from the department health facilities division website at dia-hfd.iowa.gov; by mail from the Department of Inspections, Appeals, and Licensing, Adult Services Bureau, 6200 Park Avenue, Des Moines, Iowa 50321; or by telephone at 515.281.7272.

70.9(2) Submit a copy of the current accreditation outcome from the recognized accrediting entity.

70.9(3) Maintain compliance with the requirements of the building code and fire safety bureau of the department pursuant to this chapter.

70.9(4) Submit the appropriate fees as set forth in Iowa Code section 231D.4.

481—70.10(231D) Certification or recertification of an accredited program—application content. An application for certification or recertification of an accredited program shall comply with rule 481—70.4(231D) and include a copy of the current accreditation outcome from the recognized accrediting entity.

481—70.11(231D) Initial certification process for an accredited program.

70.11(1) Within 20 working days of receiving all finalized documentation, including building code and fire safety bureau approval, the department will notify the accredited program whether the accredited program meets applicable requirements and whether certification will be issued.

70.11(2) If the decision is to certify, a certification will be issued for the term of the accreditation not to exceed three years, unless the certification is conditionally issued, suspended or revoked by either the department or the recognized accrediting entity.

70.11(3) If the decision is to deny certification, the department will provide the applicant an opportunity for hearing in accordance with rule 481—67.13(17A,231B,231C,231D).

481—70.12(231D) Recertification process for an accredited program.

70.12(1) To obtain recertification, an accredited program shall comply with rule 481—70.9(231D) at least 30 calendar days prior to the expiration of the program's certification.

70.12(2) If the facility is in good standing, a full certification shall be issued for the term of the accreditation not to exceed three years, unless the certification is conditionally issued, suspended or revoked by either the department or the recognized accrediting entity. If the decision is to deny recertification, the department will provide the applicant an opportunity for hearing in accordance with rule 481—67.14(17A,231B,231C,231D).

481—70.13(231D) Listing of all certified programs. The department will maintain a list of all certified programs, which is available online at dia-hfd.iowa.gov/DIA_HFD/Home.do.

481—70.14(231D) Recognized accrediting entity.

70.14(1) The department designates CARF as a recognized accrediting entity for programs.

70.14(2) To apply for designation by the department as a recognized accrediting entity for programs, an accrediting entity shall submit a letter of request and its standards shall meet the applicable requirements for programs.

70.14(3) The designation will remain in effect for as long as the accreditation standards meet the applicable requirements for programs.

70.14(4) An accrediting entity shall provide annually to the department, at no cost, a current edition of the applicable standards manual and survey preparation guide, and training thereon, within 120 working days after the publications are released.

481—70.15(231D) Requirements for an accredited program. Each accredited program that is certified by the department shall:

70.15(1) Provide the department a copy of all survey reports including outcomes, quality improvement plans and annual conformance to quality reports generated or received, as applicable, within ten working days of receipt of the reports.

70.15(2) Notify the department by the most expeditious means possible of all credible reports of alleged improper or inappropriate conduct or conditions within the program and any actions taken by the accrediting entity with respect thereto.

70.15(3) Notify the department immediately of the expiration, suspension, revocation or other loss of the program's accreditation.

481—70.16(231D) Maintenance of program accreditation.

70.16(1) An accredited program will continue to be recognized for certification by the department if both of the following requirements are met:

a. The program complies with the requirements outlined in rule 481—70.15(231D).

b. The program maintains its voluntary accreditation status for the duration of the time-limited certification period.

70.16(2) A program that does not maintain its voluntary accreditation status must become certified by the department prior to any lapse in accreditation or cease operation as a program.

481—70.17(231D) Change of ownership—notification to the department.

70.17(1) Certification, unless conditionally issued, suspended or revoked, may be transferable. If the program's certification has been conditionally issued, the department must approve a change of ownership prior to the transfer of the certification.

70.17(2) In order to transfer certification, the applicant must:

a. Meet the requirements of the rules, regulations and standards contained in Iowa Code chapter 231D and 481—Chapter 67 and this chapter;

b. At least 30 days prior to the change of ownership of the program, provide application and supporting documentation to the department.

70.17(3) The department may conduct a monitoring within 90 days following a change in the program's ownership to ensure that the program complies with applicable requirements. If a regulatory insufficiency is found, the department will take any necessary enforcement action authorized by applicable requirements.

481—70.18(231D) Plan reviews of a building for a new program.

70.18(1) Before a building is constructed or remodeled for use in a new program, the state building code bureau shall review the blueprints for compliance with requirements pursuant to this chapter. Construction or remodeling includes new construction, remodeling of any part of an existing building, addition of a new wing or floor to an existing building, or conversion of an existing building.

70.18(2) A program applicant shall submit construction documents to the building code bureau's online portal at dial.iowa.gov/licenses/building/plan-review.

70.18(3) The plan review fee must be paid before construction documents are uploaded to the project folder.

70.18(4) The building code bureau will notify the Iowa-licensed architect or Iowa-licensed engineer in writing regarding the status of compliance with requirements.

70.18(5) The Iowa-licensed architect or Iowa-licensed engineer shall respond to the building code bureau regarding how any noncompliance will be resolved.

70.18(6) Upon final notification by the building code bureau that the construction documents meet requirements, construction or remodeling of the building may commence.

70.18(7) The building code and fire safety bureaus will schedule an on-site visit of the building site with the contractor, or Iowa-licensed architect or Iowa-licensed engineer, during the construction or remodeling process to ensure compliance with the approved construction documents. Any noncompliance must be resolved prior to approval for certification.

481—70.19(231D) Plan review prior to the remodeling of a building for a certified program.

70.19(1) Before a building for a certified program is remodeled as defined in subrule 70.18(1), the building code bureau shall review the construction documents for compliance with requirements set forth in rule 481—70.35(231D).

70.19(2) A certified program shall submit construction documents to the building code bureau's online portal at dial.iowa.gov/licenses/building/plan-review.

70.19(3) The documents won't be reviewed until the fee is received.

70.19(4) The building code bureau will review the documents within 35 working days of receipt and notify the Iowa-licensed architect or Iowa-licensed engineer in writing regarding the status of compliance with requirements.

70.19(5) The Iowa-licensed architect or Iowa-licensed engineer shall respond to the building code bureau in 20 working days to state how any noncompliance will be resolved.

70.19(6) Upon final notification by the building code bureau that the construction documents meet structural and life safety requirements, remodeling of the building may commence.

70.19(7) The building code and fire safety bureaus will schedule an on-site visit of the building with the contractor, or Iowa-licensed architect or Iowa-licensed engineer, during the remodeling process to ensure compliance with the approved construction documents. Any noncompliance must be resolved prior to approval for continued certification or recertification of the program.

481—70.20(231D) Cessation of program operation that includes seeking decertification.

70.20(1) The program shall provide, at least 90 days in advance of cessation, unless there is some type of emergency, written notification to the department of the date on which the program will cease operation.

70.20(2) At the time a program decides to cease operation, the program shall submit a plan to the department and make arrangements for the safe and orderly discharge or transition of all participants within the 90-day period specified by subrule 70.20(1).

70.20(3) The department may conduct a monitoring during the 90-day period to ensure the safety of participants during the discharge process or transition process.

481—70.21(231D) Contractual agreement.

70.21(1) The contractual agreement shall be in 12-point type or larger, written in plain language using commonly understood terms and easy for the participant or the participant's legal representative to understand.

70.21(2) In addition to the requirements of Iowa Code section 231D.17, the written contractual agreement shall include the following information in the body of the agreement or in the supporting documents and attachments:

a. The telephone number for filing a complaint with the department.

b. The telephone number for reporting dependent adult abuse.

c. A copy of the program's statement on participants' rights.

d. A statement that the program will notify the participant at least 90 days in advance of any planned program cessation, except in cases of emergency.

e. A copy of the program's admission criteria.

70.21(3) The contractual agreement shall be reviewed and updated as necessary to reflect any change in services or financial arrangements.

70.21(4) A copy of the contractual agreement shall be provided to the participant or the participant's legal representative, if any, and a copy shall be kept by the program.

70.21(5) A copy of the most current contractual agreement shall be made available to the general public upon request.

481—70.22(231D) Evaluation of participant.

70.22(1) *Evaluation prior to participation.* A program shall evaluate each prospective participant's functional, cognitive and health status prior to the participant's signing the contractual agreement and participating in the program, with the exception of visiting day(s), to determine the participant's eligibility for the program, including whether the services needed are available. The cognitive evaluation shall be appropriate to the population served. When the cognitive evaluation indicates moderate cognitive decline and risk, the Global Deterioration Scale shall be used at all subsequent intervals, if applicable. If the participant subsequently returns to the participant'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, human service professional, or a licensed practical nurse via nurse delegation.

70.22(2) *Evaluation within 30 days of participation and with significant change.* A program shall evaluate each participant's functional, cognitive and health status within 30 days of the participant's beginning participation in the program. A program shall evaluate each participant's functional, cognitive and health status as needed with significant change, but not less than annually, to determine the participant's continued eligibility for the program and to determine any changes to services needed. The evaluation shall be conducted by a health care professional, human service professional, or. a licensed practical nurse via nurse delegation.

70.22(3) *Requirements for visiting day(s).* Evaluation of the participant is not required during visiting day(s), but the program shall provide the participant or the participant's legal representative with a written explanation of the expectations for the visiting day(s).

481—70.23(231D) Criteria for admission and retention of participants.

70.23(1) *Persons who may not be admitted or retained.* Criteria are set forth in Iowa Code section 231D.19.

70.23(2) *Disclosure of additional participation and discharge criteria.* A program may have additional participation or discharge criteria if the criteria are disclosed in the written contractual agreement prior to the participant's participation in the program.

70.23(3) *Assistance with discharge from the program.* A program shall assist a participant and the participant's legal representative, if applicable, to ensure a safe and orderly discharge from the program when the participant exceeds the program's criteria for admission and retention.

481—70.24(231D) Involuntary discharge from the program.

70.24(1) *Program initiation of discharge.* If a program initiates the involuntary discharge of a participant and the action is not the result of a monitoring, including a complaint investigation or program-reported incident investigation, by the department and if the participant or participant's legal representative contests the discharge, the procedures in Iowa Code section 231D.18 shall apply.

70.24(2) *Discharge pursuant to results of monitoring or complaint or program-reported incident investigation by the department.* If one or more participants are identified as exceeding the admission and retention criteria for participants and need to be discharged as a result of a monitoring or a complaint or program-reported incident investigation conducted by the department, the following procedures shall apply:

a. Notification of the program. Within 20 working days of the monitoring or complaint or program-reported incident investigation, the department will notify the program, in writing, of the identification of any participant who exceeds admission and retention criteria.

b. Notification of others. Each identified participant, the participant's legal representative, if applicable, and other providers of services to the participant will be notified of their opportunity to provide responses within ten days of receipt of the notice, including: specific input, written comment, information, and documentation directly addressing any agreement or disagreement with the identification.

c. Program agreement with the department's finding. If the program agrees with the department's finding and the program begins involuntary discharge proceedings, the program's internal appeal process in subrule 70.24(1) shall be utilized for appeals.

d. Program disagreement with the department's finding. If the program does not agree with the department's finding that the participant exceeds admission and retention criteria, the program may collect and submit all responses to the department, including those from other interested parties, within ten working days of receipt of the notice. In the program's response, the program will identify the participant, list the known responses from others, and note the program's agreement or disagreement with the responses from others. Submission of a response does not eliminate the applicable requirements, including submission of a plan of correction under 481—subrule 67.13(3). Other persons may also submit information directly to the department.

(1) Consideration of response. Within ten working days of receipt of the program's response for each identified participant, the department will consider the response and make a final finding regarding the continued retention of a participant.

(2) Amending the regulatory insufficiency. If the department's determination is to amend the regulatory insufficiency based on the response, the department will modify the report of findings.

(3) Retaining regulatory insufficiency. If the department retains the regulatory insufficiency, the department will review the plan of correction in accordance with this chapter and 481—Chapter 67. The department will notify the program of the opportunity to appeal the report findings as they relate to the admission and retention decision.

(4) Effect of the filing of an appeal. If an appeal is filed, the participant who exceeds admission and retention criteria will be allowed to continue to participate in the program until all administrative appeals have been exhausted. Appeals filed that relate to the participant's exceeding admission and retention criteria will be heard within 30 days of receipt, and appropriate services to meet the participant's needs will be provided during that period of time.

(5) Request for waiver of criteria for retention of a participant in a program. To allow a participant to continue to participate in the program, the program may request a waiver of criteria for retention of a participant pursuant to rule 481—67.7(231B,231C,231D) from the department within ten working days of the receipt of the report.

481—70.25(231D) Participant documents.

70.25(1) Documentation for each participant shall be maintained by the program and include:

a. A participation record including the participant's name, birth date, and home address; identification numbers; date of beginning participation; name, address and telephone number of health professional(s); diagnosis; and names, addresses and telephone numbers of family members, friends or other designated people to contact in the event of illness or an emergency;

b. Application forms;

c. The initial evaluations and updates;

d. A nutritional assessment as necessary;

e. The initial individual service plan and updates;

f. Signed authorizations for permission to release medical information, photographs, or other media information as necessary;

g. A signed authorization for the participant to receive emergency medical care as necessary;

h. A signed managed risk policy and signed managed risk consensus agreements, if any;

i. When any personal or health-related care is delegated to the program, the medical information sheet; documentation of health professionals' orders, such as those for treatment, therapy, and medication; and nurses' notes written by exception;

j. Medication lists, which will be maintained in conformance with 481—paragraph 67.5(2)*"d"*;

k. Advance health care directives as applicable;

l. A complete copy of the participant's contractual agreement, including any updates;

m. A written acknowledgment that the participant or the participant's legal representative, if applicable, has been fully informed of the participant's rights;

n. A copy of guardianship, durable power of attorney for health care, power of attorney, or conservatorship or other documentation of a legal representative;

o. Incident reports involving the participant, including but not limited to those related to medication errors, accidents, falls, and elopements (such reports need not be included in the participant's medical record);

p. A copy of waivers of admission or retention criteria, if any;

q. When the participant is unable to advocate on the participant's own behalf or the participant has multiple service providers, including hospice care providers, accurate documentation of the completion of routine personal or health-related care is required on task sheets. If tasks are doctor-ordered, the tasks will be part of the medication administration records (MARs);

r. Authorizations for the release of information, if any.

70.25(2) The program records relating to a participant shall be retained for a minimum of three years after termination of service.

70.25(3) All records shall be protected from loss, damage and unauthorized use.

481—70.26(231D) Service plans.

70.26(1) A service plan shall be developed for each participant based on the evaluations conducted in accordance with subrule 70.22 and designed to meet the specific service needs of the individual participant.

70.26(2) Prior to the participant's signing the contractual agreement and participating in the program, a preliminary service plan shall be developed by a health care professional or human service professional in consultation with the participant and, at the participant's request, with other individuals identified by the participant, and, if applicable, with the participant's legal representative. All persons who develop the plan and the participant or the participant's legal representative shall sign the plan.

70.26(3) When a participant needs personal care or health-related care, the service plan shall be updated within 30 days of the participant's participation and as needed with significant change, but not less than annually. The updated service plan shall be signed and dated by all parties.

a. If a significant change does not exist, the program may, after nurse review, add minor discretionary changes to the service plan without a comprehensive evaluation and without obtaining signatures on the service plan.

b. If a significant change relates to a recurring or chronic condition, a previous evaluation and service plan of the recurring condition may be utilized without new signatures being obtained.

70.26(4) The service plan shall be individualized and indicate:

a. The participant's identified needs and preferences for assistance;

b. Any services and care to be provided pursuant to the contractual agreement;

c. The service provider(s), if other than the program;

d. For participants who are unable to plan their own activities, including participants with dementia, planned and spontaneous activities based on the participant's abilities and personal interests.

481—70.27(231D) Nurse review. If a participant does not receive personal or health-related care, but an observed significant change in the participant's condition occurs, a nurse review shall be conducted. If a participant receives personal or health-related care, the program shall provide for a registered nurse or a licensed practical nurse via nurse delegation:

70.27(1) To monitor, at least every 90 days, or after a significant change in the participant's condition, any participant who receives program-administered prescription medications for adverse reactions to the medications and to make appropriate interventions or referrals, and to ensure that the prescription medication orders are current and that the prescription medications are administered consistent with such orders;

70.27(2) To ensure that health care professionals' orders are current for participants who receive health care professional-directed care from the program;

70.27(3) To assess and document the health status of each participant, to make recommendations and referrals as appropriate, and to monitor progress relating to previous recommendations at least every 90 days and whenever there are changes in the participant's health status;

70.27(4) To provide the program with written documentation of the activities under the service plan, as set forth in rule 481—70.26(231D), showing the time, date and signature.

481—70.28(231D) Food service.

70.28(1) The program shall provide or coordinate with other community providers to provide a hot or other appropriate meal(s) at least once a day or arrange for the availability of meals, unless otherwise noted in the contractual agreement.

70.28(2) Meals and snacks provided by the program but not prepared on site shall be obtained from or provided by an entity that meets the standards of state and local health laws and ordinances concerning the preparation and serving of food.

70.28(3) Menus shall be planned to provide the following percentage of the daily recommended dietary allowances as established by the Food and Nutrition Board of the National Research Council of the National Academy of Sciences based on the number of meals provided by the program:

a. A minimum of 33⅓ percent if the program provides one meal per day;

b. A minimum of 66⅔ percent if the program provides two meals per day; and

c. One hundred percent if the program provides three meals per day.

70.28(4) Therapeutic diets may be provided by a program. If therapeutic diets are provided, they shall be prescribed by a physician, physician assistant, or advanced registered nurse practitioner. A copy of the Iowa Simplified Diet Manual, Thirteenth Edition, published by the Iowa Academy of Nutrition and Dietetics shall be available and used in the planning and serving of therapeutic diets. A licensed dietitian shall be responsible for writing and approving the therapeutic menu and for reviewing procedures for food preparation and service for therapeutic diets.

70.28(5) Personnel who are employed by or contract with the program and who are responsible for food preparation or service, or both food preparation and service, shall have an orientation on sanitation and safe food handling prior to handling food and shall have annual in-service training on food protection.

a. In addition to the requirements above, a minimum of one person directly responsible for food preparation shall have successfully completed a state-approved food protection program by:

(1) Obtaining certification as a dietary manager; or

(2) Obtaining certification as a food protection professional; or

(3) Successfully completing an ANSI-accredited certified food protection manager program meeting the requirements for a food protection program included in the Food Code adopted pursuant to Iowa Code chapter 137F. Another program may be substituted if the program's curriculum includes substantially similar competencies to a program that meets the requirements of the Food Code and the provider of the program files with the department a statement indicating that the program provides substantially similar instruction as it relates to sanitation and safe food handling.

b. If the person is in the process of completing a course or certification listed in paragraph 70.28(5)*"a,"* the requirement relating to completion of a state-approved food protection program will be considered to have been met.

70.28(6) Programs engaged in the preparation and service of meals and snacks shall meet the standards of state and local health laws and ordinances pertaining to the preparation and service of food and be licensed pursuant to Iowa Code chapter 137F. The department will not require the program to be licensed as a food establishment if the program limits food activities to the following:

a. All main meals and planned menu items will be prepared offsite and transferred to the program kitchen for service to participants.

b. Baked goods that do not require temperature control for safety and single-service juice or milk may be stored in the program's kitchen and provided as part of a continental breakfast.

c. Ingredients used for food-related activities with participants may be stored in the program's kitchen. Participant activities may include the preparation and cooking of food items in the program's kitchen if the activity occurs on an irregular or sporadic basis and the items prepared are not part of the program's menu.

d. Appropriately trained staff may prepare in the program's kitchen individual quantities of participant-requested menu-substitution food items that require limited or no preparation, such as peanut butter or cheese sandwiches or a single-service can of soup. The food items necessary to prepare the menu substitution may be stored in the program's kitchen. These food items may not be cooked in the program's kitchen but may be reheated in a microwave. A two- or four-slice toaster may be used for participant-requested menu-substitution items, but no bare-hand contact.

e. Warewashing may be done in the program's kitchen as long as the program utilizes a commercial dishwasher and documents daily testing of sanitizer chemical ppm and proper water temperatures. Verification by the department of these practices may be conducted during on-site visits.

481—70.29(231D) Staffing. In addition to the general staffing requirements in rule 481—67.9(231B,231C,231D), the following requirements apply to staffing in programs.

70.29(1) No fewer than two staff persons who monitor participants will be awake and on duty during all hours of operation when two or more participants are participating in the program.

70.29(2) The owner or management corporation of the program is responsible for ensuring that all personnel employed by or contracting with the program receive training appropriate to assigned tasks and target population.

70.29(3) A program that serves one or more participants with cognitive disorders or dementia will follow written procedures that address how the program will respond to the emergency needs of the participants.

70.29(4) The program will notify the department in writing within ten business days of a change in the program's manager.

481—70.30(231D) Dementia-specific education for program personnel.

70.30(1) All personnel employed by or contracting with a dementia-specific program shall receive a minimum of eight hours of dementia-specific education and training within 30 days of either employment or the beginning date of the contract, as applicable.

70.30(2) The dementia-specific education or training shall include the following:

a. An explanation of Alzheimer's disease and related disorders;

b. The program's specialized dementia care philosophy and program;

c. Skills for communicating with persons with dementia;

d. Skills for communicating with family and friends of persons with dementia;

e. An explanation of family issues such as role reversal, grief and loss, guilt, relinquishing the care-giving role, and family dynamics;

f. The importance of planned and spontaneous activities;

g. Skills in assistance with instrumental activities of daily living;

h. The importance of the service plan and social history information;

i. Skills in working with challenging participants;

j. Techniques for simplifying, cueing, and redirecting;

k. Staff support and stress reduction;

l. Medication management and nonpharmacological interventions.

70.30(3) All personnel employed by or contracting with a dementia-specific program shall receive a minimum of two hours of dementia-specific continuing education annually. Direct-contact personnel shall receive a minimum of eight hours of dementia-specific continuing education annually.

70.30(4) An employee or contractor who provides documentation of completion of a dementia-specific education or training program within the past 12 months will be exempt from the education and training requirement of subrule 70.30(1).

70.30(5) Dementia-specific training will include hands-on training and include: classroom instruction, Web-based training, and case studies of participants in the program.

481—70.31(231D) Managed risk policy and managed risk consensus agreements. The program shall have a managed risk policy that will be provided to the participant along with the contractual agreement and include:

70.31(1) An acknowledgment of the shared responsibility for identifying and meeting the needs of the participant and the process for managing risk and for upholding participant autonomy when participant decision making results in poor outcomes for the participant or others;

70.31(2) A consensus-based process to address specific risk situations. Program staff and the participant will participate in the process. The result of the consensus-based process may be a managed risk consensus agreement that will include the signature of the participant and the signatures of all others who participated in the process and be included in the participant's file.

481—70.32(231D) Life safety—emergency policies and procedures and structural safety requirements.

70.32(1) The program shall submit to the department and follow written emergency policies and procedures, including:

a. An emergency plan, with procedures for natural disasters that is located for easy reference;
b. Fire safety procedures;
c. Other general or personal emergency procedures, including head injury protocols;
d. Provisions for amending or revising the emergency plan;
e. Provisions for periodic training of all employees;
f. Procedures for fire drills;
g. Regulations regarding smoking;
h. Monitoring and testing of smoke-control systems;
i. Participant evacuation procedures;
j. Procedures for reporting and documentation;
k. Extraordinary lifesaving measures, such as cardiopulmonary resuscitation (CPR).

70.32(2) An operating alarm system shall be connected to each exit door in a dementia-specific program. A program serving a person(s) with cognitive disorder or dementia, whether in a general or dementia-specific setting, shall have written procedures regarding:

a. Alarm systems and appropriate staff response when a participant's service plan indicates a risk of elopement or a participant exhibits wandering behavior.

b. Appropriate staff response if a participant with cognitive disorder or dementia is missing.

The program shall obtain approval from the fire safety bureau before the installation of any specialized door locking systems.

70.32(3) The program's structure and procedures and the facility in which a program is located shall meet the requirements adopted for adult day services programs in administrative rules promulgated by the building code and fire safety bureaus. Approval of both bureaus indicating that the building complies with these requirements is necessary for certification of a program.

70.32(4) The program shall have the means to control the maximum temperature of water at sources accessible by a participant to prevent scalding and control the maximum water temperature for participants with cognitive impairment or dementia or at a participant's request.

481—70.33(231D) Transportation. When transportation services are provided directly or under contract with the program the following shall apply:

70.33(1) The vehicle will be accessible and appropriate to the participants who use it, with consideration for any physical disabilities and impairments.

70.33(2) Every participant transported will have a seat in the vehicle, except for a participant who remains in a wheelchair during transport.

70.33(3) Vehicles will have adequate seat belts and securing devices for ambulatory and wheelchair-using passengers.

70.33(4) Wheelchairs will be secured when the vehicle is in motion.

70.33(5) During loading and unloading of a participant, the driver will be in the proximate area of the participants in a vehicle.

70.33(6) The driver will have a valid and appropriate Iowa driver's license or commercial driver's license as required by law for the vehicle being utilized for transport, or be so licensed in another state. The driver will meet any state or federal requirements for licensure or certification for the vehicle operated.

70.33(7) Each vehicle will have a first-aid kit, fire extinguisher, safety triangles and a device for two-way communication.

481—70.34(231D) Activities.

70.34(1) The program shall provide appropriate activities for each participant reflecting individual differences in age, health status, sensory deficits, lifestyle, ethnic and cultural beliefs, religious beliefs, values, experiences, needs, interests, abilities and skills by providing opportunities for a variety of types and levels of involvement.

70.34(2) Activities shall be planned to support the participant's service plan and be consistent with the program statement and participation policies.

70.34(3) A written schedule of activities shall be developed at least monthly and made available to participants and their legal representatives.

70.34(4) Participants shall be given the opportunity to choose their levels of participation in all activities offered in the program.

481—70.35(231D) Structural requirements.

70.35(1) The structure, equipment and physical environment of the program will be designed and operated to meet the needs of the participants. The building, grounds and equipment will be well-maintained, clean, safe and sanitary.

70.35(2) There will be at least one toilet for every ten participants and staff members.

70.35(3) Toilets and bathing and toileting appliances will be equipped for use by participants with multiple disabilities.

70.35(4) There will be a ratio of at least one hand-washing sink for every two toilets. The sink(s) will be proximate to the toilets. Hand-washing facilities will be readily accessible to participants and staff.

70.35(5) Shower and tub areas, if provided, will be equipped with grab bars and slip-resistant surfaces.

70.35(6) Signaling emergency call devices will be installed or placed in all bathroom areas, restroom stalls and showers.

70.35(7) A telephone will be available to participants to make and receive calls in a private manner and for emergency purposes.

70.35(8) A storage area(s) will be provided for storage of program supplies and participants' possessions, which will be stored in such a manner that, when not in use, will prevent personal injury to participants and staff.

70.35(9) The program will provide a separate area to permit privacy for evaluations and to isolate participants who become ill.

70.35(10) The program will meet other building and public safety codes, including rules pertaining to accessibility contained in the state building code and provisions of the state building code relating to persons with disabilities.

70.35(11) The program will meet the requirements in subrule 70.32(4).

481—70.36(231D) Identification of veteran's benefit eligibility.

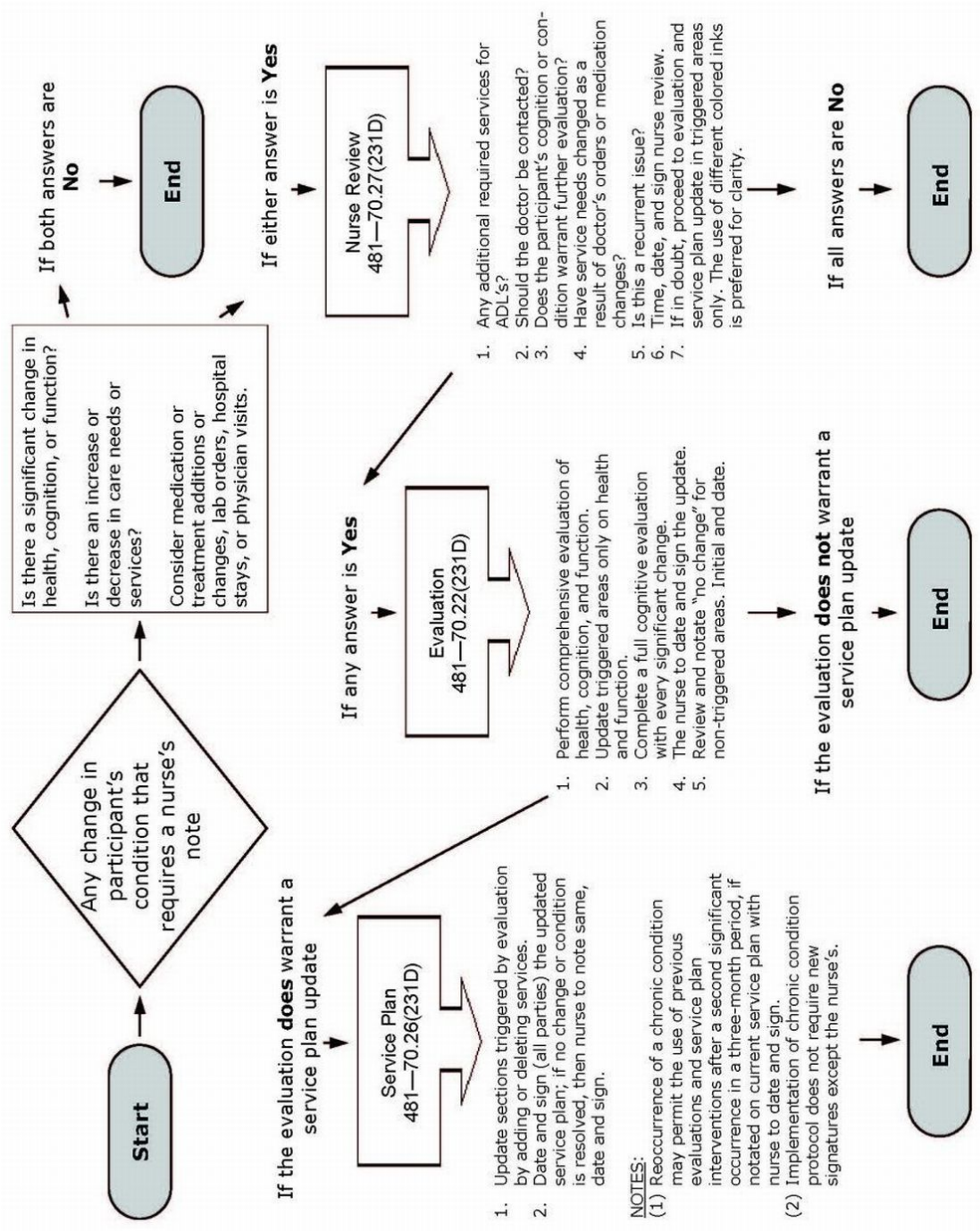
70.36(1) Within 30 days of a participant's participation in an adult day services program that receives reimbursement through the medical assistance program under Iowa Code chapter 249A, the program shall ask the participant or the participant's personal representative whether the participant is a veteran or whether the participant is the spouse, widow or dependent of a veteran and document the response.

70.36(2) If the participant may be a veteran or the spouse, widow, or dependent of a veteran, the program shall report the participant's name along with the name of the veteran, if applicable, as well as the name of the contact person for this information, to the Iowa department of veterans affairs. The program may also report such information to the Iowa department of health and human services.

70.36(3) If a participant is eligible for benefits through the U.S. Department of Veterans Affairs or other third-party payor, the program first shall seek reimbursement from the identified payor source before seeking reimbursement from the medical assistance program established under Iowa Code chapter 249A.

These rules are intended to implement Iowa Code chapter 231D.

Table A


Start
Any change in participant's condition that requires a nurse's note
Is there a significant change in health, cognition, or function?
Is there an increase or decrease in care needs or services?
Consider medication or treatment additions or changes, lab orders, hospital stays, or physician visits.
If both answers are No
End
If either answer is Yes
Nurse Review 481—70.27(231D)
1. Any additional required services for ADL's?
2. Should the doctor be contacted?
3. Does the participant's cognition or condition warrant further evaluation?
4. Have service needs changed as a result of doctor's orders or medication changes?
5. Is this a recurrent issue?
6. Time, date, and sign nurse review.
7. If in doubt, proceed to evaluation and service plan update in triggered areas only. The use of different colored inks is preferred for clarity.
If any answer is Yes
Evaluation 481—70.22(231D)
1. Perform comprehensive evaluation of health, cognition, and function.
2. Update triggered areas only on health and function.
3. Complete a full cognitive evaluation with every significant change.
4. The nurse to date and sign the update.
5. Review and notate "no change" for non-triggered areas. Initial and date.
If the evaluation does not warrant a service plan update
If all answers are No
End
End
If the evaluation does warrant a service plan update
Service Plan 481—70.26(231D)
1. Update sections triggered by evaluation by adding or deleting services.
2. Date and sign (all parties) the updated service plan; if no change or condition is resolved, then nurse to note same, date and sign.
NOTES:
(1) Reoccurrence of a chronic condition may permit the use of previous evaluations and service plan interventions after a second significant occurrence in a three-month period, if notated on current service plan with nurse to date and sign.
(2) Implementation of chronic condition protocol does not require new signatures except the nurse's.
End