

IOWA

Overview			
<p>Iowa certifies adult day services programs, which may include dementia-specific adult day services, under Section 321 Chapter 24 of the <i>Iowa Administrative Code</i>, adopted by the Department of Elder Affairs and implemented by the Department of Inspections and Appeals.</p> <p>Iowa provides adult day services under its Elderly, Mental Retardation, and Ill and Handicapped Waivers, administered by the Iowa Department of Human Services, which accepts the adult day services providers that are certified by the Department of Inspections and Appeals under Section 321 Chapter 24.</p>			
Licensure and Certification Requirements			
Licensure Only <input type="checkbox"/>	Certification Only <input checked="" type="checkbox"/>	Both Required <input type="checkbox"/>	Other <input type="checkbox"/>
Definitions			
<p>Adult day services program means an organized program providing a variety of health, social, and related support services for 16 hours or less in a 24-hour period to two or more persons with a functional impairment on a regularly scheduled, contractual basis.</p> <p>Dementia-specific adult day services program means a certified program that either serves five or more participants with dementia between stages four and seven on the Global Deterioration Scale or holds itself out as providing specialized care for persons with a cognitive disorder or dementia, such as Alzheimer's disease, in a dedicated setting.</p>			
Parameters for Who Can Be Served			
<p>Programs may not knowingly admit or retain a participant who: (1) is bedfast; (2) requires routine three-person assistance with standing, transfer, or evacuation; (3) is dangerous to self or others, including but not limited to a participant who (a) despite intervention, chronically wanders into danger, is sexually or physically aggressive or abusive, or displays unmanageable verbal abuse or aggression or (b) displays behavior that places another participant at risk; (4) is in an acute stage of alcoholism, drug addiction, or uncontrolled mental illness; (5) is under 18 years of age; (6) requires more than part-time or intermittent health-related care; or (7) on a routine basis has unmanageable incontinence.</p>			
Inspection and Monitoring			
Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>	
<p>The Department of Inspections and Appeals shall conduct on-site monitoring within 90 calendar days following issuance of conditional certification, and between 60 and 90 days prior to expiration of a program's certification. The Department shall monitor a certified program at least once during the program's certification period.</p> <p>The Department may conduct an on-site monitoring evaluation within 90 days following a change in ownership or management corporation to ensure that the program complies with requirements.</p>			

Required and Optional Services		
	Adult Day and Dementia-Specific Adult Day Services	
	Required	Optional
Activities of Daily Living (ADL) Assistance	X	
Health Education and Counseling		
Health Monitoring/Health-Related Services		X
Medication Administration		X
Nursing Services		X
Physical Therapy, Occupational Therapy, or Speech Therapy		
Skilled Nursing Services		X
Social Services		
Transportation		X
Provisions Regarding Medications		
<p>Each program shall have a written medication policy that includes the following:</p> <p>Participants shall self-administer medications unless: (1) the prescription states that the participant is not to self-administer the medication; or (2) the participant or, if applicable, the legal representative, delegates administration to the program by contractual agreement or signed service plan. The program shall not prohibit a participant from self-administering medications.</p> <p>When partial or complete control of medication is delegated to the program by the participant, appropriate staff may transfer medication from the original prescription containers into medication reminder boxes or medication cups in the participant's presence. A program that administers prescription medications shall provide for a registered nurse to monitor adverse reactions.</p>		
Provisions for Groups with Special Needs		
Dementia <input checked="" type="checkbox"/>	Mental Retardation/ Developmental Disabilities <input type="checkbox"/>	Other <input type="checkbox"/>
Staffing Requirements		
<p>Type of staff. A program that administers prescription medications or provides professionally directed health care or health-related care shall provide for a <i>registered nurse</i>.</p> <p>Staffing ratios. Sufficient trained staff shall be available at all times to fully meet participants' identified needs. No fewer than two staff persons who monitor participants as indicated in each participant's service plan shall be awake and on duty during all hours of operations when two or more participants are present.</p>		
Training Requirements		
<p>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 the target population.</p> <p>All personnel employed by or contracting with a dementia-specific program shall receive a minimum of 6 hours of dementia-specific education and training prior to or within 90 days of employment or the beginning date of the contract. The dementia-specific education or training shall include, at a minimum, the following: (1) an explanation of Alzheimer's disease and related disorders; (2) the program's</p>		

specialized dementia care philosophy and program; (3) skills for communicating with persons with dementia; (4) skills for communicating with family and friends of persons with dementia; (5) an explanation of family issues such as role reversal, grief and loss, guilt, relinquishing the care-giving role, and family dynamics; (6) the importance of planned and spontaneous activities; (7) skills in providing assistance with activities of daily living; (8) the importance of the care plan and social history information; (9) skills in working with challenging participants; (10) techniques for simplifying, cueing, and redirecting; and (11) staff support and stress reduction.

All personnel employed by or contracting with a dementia-specific program shall receive a minimum of 2 hours of dementia-specific continuing education annually. Direct-contact personnel shall receive a minimum of 6 hours of dementia-specific continuing education annually.

All personnel of a program shall be able to implement the program's accident, fire safety, and emergency procedures.

Relevant Medicaid Contracting Requirements for Adult Day Services Providers

Iowa provides adult day services under its Elderly, Mental Retardation, and Ill and Handicapped Waivers, administered by the Iowa Department of Human Services. Adult day care providers shall be agencies that are certified by the Department of Inspections and Appeals as being in compliance with the standards for adult day services programs adopted by the Department of Elder Affairs in Section 321, Chapter 24 of the *Iowa Administrative Code*.

Location of Licensing, Certification or Other Requirements

1. http://www.dhs.state.ia.us/policyanalysis/PolicyManualPages/Manual_Documents/Provman/ill.pdf
2. http://www.dhs.state.ia.us/policyanalysis/PolicyManualPages/Manual_Documents/Provman/eldwaiv.pdf
3. <http://www2.legis.state.ia.us/rules/current/iac/321iac/32124/32124.pdf>
4. <http://www2.legis.state.ia.us/rules/current/iac/321iac/32126/32126.pdf>

Citations

1. *Medicaid Provider Manual. HCBS Ill and Handicapped Waiver*. State of Iowa. Department of Human Services. [3/1/2003]
2. *Medicaid Provider Manual. HCBS Elderly Waiver Services*. State of Iowa. Department of Human Services. [7/1/2000]
3. *Iowa Administrative Code*, Section 321, Chapter 24. [4/14/2004]
4. *Iowa Administrative Code*, Section 321, Chapter 26. [9/29/2004]

REGULATORY REVIEW OF ADULT DAY SERVICES: Final Report

PDF Files Available for This Report

Cover, Table of Contents, Acknowledgments and Introduction

<http://aspe.hhs.gov/daltcp/reports/adultday.pdf>

SECTION 1. Overview of Adult Day Services Regulations

<http://aspe.hhs.gov/daltcp/reports/adultday1.pdf>

SECTION 2. State Regulatory Profiles

<http://aspe.hhs.gov/daltcp/reports/adultday2.pdf>

Each state can also be viewed separately at:

Alabama <http://aspe.hhs.gov/daltcp/reports/adultdayAL.pdf>

Alaska <http://aspe.hhs.gov/daltcp/reports/adultdayAK.pdf>

Arizona <http://aspe.hhs.gov/daltcp/reports/adultdayAZ.pdf>

Arkansas <http://aspe.hhs.gov/daltcp/reports/adultdayAR.pdf>

California <http://aspe.hhs.gov/daltcp/reports/adultdayCA.pdf>

Colorado <http://aspe.hhs.gov/daltcp/reports/adultdayCO.pdf>

Connecticut <http://aspe.hhs.gov/daltcp/reports/adultdayCT.pdf>

Delaware <http://aspe.hhs.gov/daltcp/reports/adultdayDE.pdf>

District of Columbia <http://aspe.hhs.gov/daltcp/reports/adultdayDC.pdf>

Florida <http://aspe.hhs.gov/daltcp/reports/adultdayFL.pdf>

Georgia <http://aspe.hhs.gov/daltcp/reports/adultdayGA.pdf>

Hawaii <http://aspe.hhs.gov/daltcp/reports/adultdayHI.pdf>

Idaho <http://aspe.hhs.gov/daltcp/reports/adultdayID.pdf>

Illinois <http://aspe.hhs.gov/daltcp/reports/adultdayIL.pdf>

Indiana <http://aspe.hhs.gov/daltcp/reports/adultdayIN.pdf>

Iowa <http://aspe.hhs.gov/daltcp/reports/adultdayIA.pdf>

Kansas <http://aspe.hhs.gov/daltcp/reports/adultdayKS.pdf>

Kentucky <http://aspe.hhs.gov/daltcp/reports/adultdayKY.pdf>

Louisiana <http://aspe.hhs.gov/daltcp/reports/adultdayLA.pdf>

Maine <http://aspe.hhs.gov/daltcp/reports/adultdayME.pdf>

Maryland <http://aspe.hhs.gov/daltcp/reports/adultdayMD.pdf>

Massachusetts <http://aspe.hhs.gov/daltcp/reports/adultdayMA.pdf>
Michigan <http://aspe.hhs.gov/daltcp/reports/adultdayMI.pdf>
Minnesota <http://aspe.hhs.gov/daltcp/reports/adultdayMN.pdf>
Mississippi <http://aspe.hhs.gov/daltcp/reports/adultdayMS.pdf>
Missouri <http://aspe.hhs.gov/daltcp/reports/adultdayMO.pdf>
Montana <http://aspe.hhs.gov/daltcp/reports/adultdayMT.pdf>

Nebraska <http://aspe.hhs.gov/daltcp/reports/adultdayNE.pdf>
New Hampshire <http://aspe.hhs.gov/daltcp/reports/adultdayNH.pdf>
New Jersey <http://aspe.hhs.gov/daltcp/reports/adultdayNJ.pdf>
New Mexico <http://aspe.hhs.gov/daltcp/reports/adultdayNM.pdf>
New York <http://aspe.hhs.gov/daltcp/reports/adultdayNY.pdf>
Nevada <http://aspe.hhs.gov/daltcp/reports/adultdayNV.pdf>
North Carolina <http://aspe.hhs.gov/daltcp/reports/adultdayNC.pdf>
North Dakota <http://aspe.hhs.gov/daltcp/reports/adultdayND.pdf>

Ohio <http://aspe.hhs.gov/daltcp/reports/adultdayOH.pdf>
Oklahoma <http://aspe.hhs.gov/daltcp/reports/adultdayOK.pdf>
Oregon <http://aspe.hhs.gov/daltcp/reports/adultdayOR.pdf>

Pennsylvania <http://aspe.hhs.gov/daltcp/reports/adultdayPA.pdf>

Rhode Island <http://aspe.hhs.gov/daltcp/reports/adultdayRI.pdf>

South Carolina <http://aspe.hhs.gov/daltcp/reports/adultdaySC.pdf>
South Dakota <http://aspe.hhs.gov/daltcp/reports/adultdaySD.pdf>

Tennessee <http://aspe.hhs.gov/daltcp/reports/adultdayTN.pdf>
Texas <http://aspe.hhs.gov/daltcp/reports/adultdayTX.pdf>

Utah <http://aspe.hhs.gov/daltcp/reports/adultdayUT.pdf>

Vermont <http://aspe.hhs.gov/daltcp/reports/adultdayVT.pdf>
Virginia <http://aspe.hhs.gov/daltcp/reports/adultdayVA.pdf>

Washington <http://aspe.hhs.gov/daltcp/reports/adultdayWA.pdf>
West Virginia <http://aspe.hhs.gov/daltcp/reports/adultdayWV.pdf>
Wisconsin <http://aspe.hhs.gov/daltcp/reports/adultdayWI.pdf>
Wyoming <http://aspe.hhs.gov/daltcp/reports/adultdayWY.pdf>