Iowa Department of Inspections and Appeals
Assisted Living Program
Re-certification Monitoring Evaluation Report

Assisted Living Program:

Debbie Klatt, Administrator
Otsego Place
520 Otsego Street
Storm Lake, IA 50588

Date of Monitoring Visit:

October 3, 2005

Monitor(s):

Mary Oliver, LISW

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 25.8(3)]. 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 Re-certification Monitoring Evaluation Report. Depending on the circumstances, DIA may re-visit 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 this chapter 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 specialized care for persons with cognitive disorder or dementia, such as Alzheimer's disease, in a dedicated setting.

Overview:

An on-site monitoring evaluation was conducted at Otsego Place on October 3, 2005. 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:	35
Current number of tenants with cognitive disorder:	4
Total Population:	39

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

***These are the census numbers represented by the program to be applicable.**

Tenant/Family Satisfaction Results – Thirteen of thirty-nine tenants attended the community meeting and four tenants were interviewed individually. No family members were present for an interview. All tenants interviewed were alert and well oriented. They stated they were generally happy with the program and would recommend it to others. The tenants had a few minor issues with the program. They would like more activities, and they expected to have a full activity program when a new activity director was hired. The program confirmed that a new activity director had been hired that day. There was some confusion regarding transportation costs to medical appointments. One tenant thought the nurses and aides did not always wash their hands or use sanitizer when they entered their apartments.

Complaint History – There were no complaints filed during this certification period.

On-Site Monitoring Evaluation – The monitor(s) made the observations detailed in the following areas. There were no regulatory insufficiencies noted during this onsite evaluation.

Dated this 12th day of October 2005.