

**Iowa Department of Inspections and Appeals  
Assisted Living Program  
Final Recertification Monitoring Evaluation Report**

**Assisted Living Program:**

Chris Hedger, Administrator  
Longview Retirement Apartments Assisted Living  
1010 Longview Road  
Missouri Valley, IA 51555

**Date of Monitoring Visit:**

March 31, 2008

**Monitor(s):**

Michael Streepy, RN

**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 Recertification Monitoring Evaluation 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 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 Longview Retirement Apartments Assisted Living on March 31, 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:	16
Current number of tenants with cognitive disorder:	4
Total Population:	20

**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 11 tenants. Tenants stated the living environment is very good. Staff are kind, friendly and helpful with response to requests for assistance, at less than one minute. Tenants stated the food is very good with too much being provided and some criticism with the amount wasted. Tenants stated the only thing staff or Administration could do to make the program better would be to ensure coffee pots were at each table for every meal. Tenants stated there are enough interesting activities planned. They feel safe and noted they participate in fire drills with evacuation to safety taking between three to five minutes. Tenants stated services are provided as expected in occupancy agreements. Tenants stated they make their own decisions with no restrictions on activities or visitors. Medical services are good with nurses responding to problems assessing needs and summoning appropriate services. Tenants stated general satisfaction with the program and have recommended it to friends and family.

**Program History** – There were no substantiated complaints this certification period.

**On-Site Monitoring Evaluation** – The monitor(s) made the observations detailed in the following areas.

**A. Service Plan** – Program has an individualized service plan developed and updated for each tenant as required. [321 IAC 25.28]

Monitoring Observation: Tenant #1, a 91 year old was admitted 06-10-04 with diagnoses including: Lethargy and Back Pain. The tenant had a Global Deterioration Score (GDS) of 4 indicating moderate cognitive decline dated 7-10-07. Review of the service plan, dated 3-11-08, reveals the plan is not based on the cognitive evaluation which was completed on 3-14-08, three days after development of the service plan.

Tenant #2, a 96 year old was admitted 11-18-97 with diagnoses including: Anemia, Glaucoma and Hypertension. The tenant had a GDS of 5 indicating moderately severe cognitive decline, updated 2-21-08. Review of the service plan dated 11-19-07 reveals the plan was not based on the cognitive evaluation which was dated 11-27-07, 16 days after development of the service plan.

- Regulatory Insufficiency: The program did not consistently ensure service plans developed for each tenant would be based on evaluations conducted in accordance with 25.23(1) and 25.23(2), and designed to meet the specific service needs of the individual tenant. (25.28(1))

**B. Transportation** – When the program provides transportation services directly or under contract with the program, the services shall be provided as required. [321 IAC 25.38]

Monitoring Observation: Interview and review of program staff operating program owned transportation reveals Staff #1 does not have a chauffeur's license with passenger endorsement for operating the handicapped accessible van.

- Regulatory Insufficiency: The program did not consistently ensure when transportation services are provided directly or under contract with the program, that the driver has a valid and appropriate Iowa driver's license or commercial driver's license as required by law for the vehicle being used for transport. (25.38(6))

Dated this 25th day of April, 2008.



# Longview Home Inc.

1010 Longview Road

Missouri Valley, Iowa 51555

Nurses Station Ph. 642-2309 Office Ph. 642-2264

April 29, 2008

## HEALTH FACILITIES

MAY 02 2008

Ms Tamara Halvorson  
Lead Certification Coordinator- Western  
Adult Services Bureau  
Department of Inspections and Appeals  
Lucas State Office Building  
Des Moines, IA 50319-0083

Dear Ms Halvorson,

We received the Re-certification Monitoring Evaluation Report completed by the Department of Inspections and Appeals. Please accept our plan of correction.

- A. Service Plan-** The program will complete new service plans on Tenant #1 and #2 making sure to complete all needed assessments prior to development of the plan. All tenants will have all their assessments completed prior to development of the service plan. The program will review the codes for completing timely assessments in order to ensure that service plans are developed based on the assessments. The program will be in compliance by 5-9-08. The administrator will review new service plans weekly for 2 months and then monthly for 6 months to assure compliance.
- B. Transportation-** Staff #1 will obtain a chauffeur's license with a passenger endorsement for operating the handicapped accessible van. Any Longview Assisted Living employee who has the responsibility of driving the handicap mini-van with passengers will obtain a chauffeur's license. The program will be in compliance by 5-9-08. Anyone hired who will be required to drive the handicap mini-van for their job duties will also be required to obtain a chauffeur's license prior to hire. The administrator will monitor compliance with this regulation.

If you have any questions regarding this plan of correction, please contact us at the numbers listed above.

Sincerely,

Chris Hedger  
Assisted Living Program Administrator