IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

October 31, 2008

Mr. Greg Witte, Administrator
Risen Son Christian Village
3000 Risen Son Blvd.
Council Bluffs, IA 51503

RE: Recertification Monitoring Evaluation Report, Risen Son Christian Village, Council Bluffs, IA

Dear Mr. Witte:

The Department of Inspections and Appeals (DIA) has completed the review of your Plan of Correction (POC) in response to the **Recertification Monitoring Evaluation Report**. Based upon a complete review of the Report and your actions to correct the identified Regulatory Insufficiency, DIA accepts your POC. The Final report is enclosed.

The review of the recertification documents you submitted has been completed and the documents are accepted. In addition, the State Fire Marshal's (SFM) inspection report has been received as well as the Facility Engineer's approval of the Evacuation Plans for your program.

Enclosed you will find the Assisted Living Program Certificate with effective dates of **November 12, 2008 through November 11, 2010**. If you have any questions regarding this certification, please contact me at 515/281-5721.

Sincerely,

Tamara Halvorson

Tamara Halvorson
ASB Lead Certification Coordinator
Adult Services Bureau

Enclosure

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

Assisted Living Program:

Greg Witte, Administrator
Risen Son Christian Village
3000 Risen Son Blvd.
Council Bluffs, IA 51503

Date of Monitoring Visit:

October 7 and 8, 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 Risen Son Christian Village on October 7 and 8, 2008. In preparing this report, the following information was considered:

Current Program Census:

General Population Program (GPP) – Not applicable.

Dementia Specific Program (DSP)* – A program that is a Dementia Specific Program by definition or holds itself out as providing specialized care in a dedicated setting but may have tenants without cognitive disorder.

Current number of tenants in a DSP that holds itself out as providing specialized care in a dedicated setting:	10
Current number of tenants without cognitive disorder:	11
Total Population:	21

***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 5 tenants. The tenants characterized the program environment as fine with requests for assistance in repairs responded to quickly. Tenants stated staff are very good and helpful with quick response to requests for assistance. The food is good with plenty offered and choices at each meal. Tenants stated activities are good with the need to get more of the tenants involved. Tenants feel safe in the program and participate in fire drills. They are receiving services as stated in occupancy agreements. They make their own decisions in daily activities and are not restricted. Tenants stated satisfaction with medical services. Tenants stated satisfaction with the program and would recommend it to friends and family members.

Program History – There were substantiated regulatory insufficiencies in the areas of Evaluation of Tenant, Service Plan, Medications, Nurse Review and Staffing during this certification period.

On-Site Monitoring Evaluation – The monitor(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]

- Monitoring Observation: Review of personnel files for Staff #1, a Licensed Practical Nurse, with a hire date of 07-31-03, revealed no documentation of annual in-service training on food protection.

  Review of personnel files for Staff #2, a Certified Nurse Aide, with a hire date of 08-25-08, revealed no documentation of annual in-service training on food protection.

  Review of personnel files for Staff #3, a Certified Nurse Aide, with a hire date of 11-19-07, revealed no documentation of annual in-service training on food protection.

  Review of personnel files for Staff #4, a Certified Nurse Aide, with a hire date of 10-15-07, revealed no documentation of annual in-service training on food protection.

  Interview with the Administrator and Dietary Manager confirmed there is no documentation of staff participating in a state approved food protection program.

- Regulatory Insufficiency: The program did not consistently ensure that personnel who are employed by or contracting with the program and who are responsible for preparing or serving food, or both preparing and serving food, shall have an orientation on sanitation and safe food handling prior to handling food and shall have annual in-service on food protection. At a minimum, one person directly responsible for food preparation shall have successfully completed a state approved food protection program.

Dated this 14th day of October, 2008.