

CHESTER J. CULVER
GOVERNOR

DEAN A. LERNER, DIRECTOR

PATTY JUDGE
LT. GOVERNOR

November 17, 2008

Dee Luttenegger, Administrator
Senior Suites of Urbandale Assisted Living
4700 84th St
Urbandale, IA 50322-7352

RE: Recertification Monitoring Evaluation Report, Senior Suites of Urbandale Assisted Living, Urbandale, IA

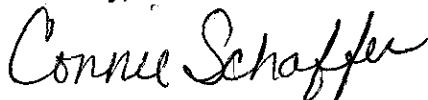
Dear Ms. Luttenegger:

The Department of Inspections and Appeals (DIA) has reviewed your Request for Reconsideration in response to the **Recertification Monitoring Evaluation Report** and denies the Request for Reconsideration as it relates to Medications. The Plan of Correction is accepted.

The program displayed prompt action to correct the identified Regulatory Insufficiency. The Department's findings must be based on the current situation, including but not limited to: staff interviews, documentation, monitor observation and tenant interviews.

Enclosed you will find the Assisted Living Program Certificate with effective dates of **November 2, 2008 through November 1, 2010**. If you have any questions regarding this certification, please contact me at 515-281-5003

Sincerely,



Connie Schaffer
Certification Coordinator – Central Iowa
Health Facilities Division
Adult Services Bureau

Enclosure

LUCAS STATE OFFICE BUILDING, 321 EAST 12TH STREET, DES MOINES, IOWA 50319-0083

ADMINISTRATION
(515) 281-5457
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HEALTH FACILITIES
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INVESTIGATIONS
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**Iowa Department of Inspections and Appeals
Assisted Living Program
Final Recertification Monitoring Evaluation Report**

Assisted Living Program:

Dee Luttenegger, Administrator
Senior Suites of Urbandale Assisted Living
4700 84th St
Urbandale, IA 50322-7352

Date of Monitoring Visit:

October 8, 2008

Monitor(s):

Lincoln Newsom, 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 Senior Suites of Urbandale Assisted Living on October 8, 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:	38
Current number of tenants with cognitive disorder:	1
Total Population:	39

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 with 11 tenants was held. In the meeting tenants stated the building and grounds are well kept and staff is nice to them. Food is excellent, with choices. The tenants felt the Administrator did not need to change anything at the current time. There are plenty of activities available. There are no safety concerns and tenants feel they are getting what they are paying for. Tenant autonomy is respected. In the event of an emergency, pull cords are available in the tenants' rooms, with some tenants having emergency call pendants. All tenants stated they would recommend this program to friends and family as a place to live.

Program History – There were no substantiated regulatory insufficiencies during this certification period.

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

A. Medications – Program has a comprehensive written medication policy that allows tenant self-administration, but accommodates the need for tenant medication assistance via nurse delegation. The medication assistance is appropriately supervised and administered. Medications are appropriately stored. [231C.16A]

Monitoring Observation: The following table illustrates medications that the program either failed to give to the tenant or failed to document as given.

Tenant #1	Caltrate-600 +D Glyburide 2.5mg twice daily Namenda 10mg twice daily Aricept 10mg daily at 8:00p.m	9-30-08, not given or documented as given
	Blood pressure and pulse daily x one week	9-19-08, no pulse documented 9-20, and 9-21-08 no blood pressure or pulse documented
Tenant #2	Seroquel 100mg twice daily Cyclobenzaprine HCL 10mg daily Zocor 40mg daily, 8:00p.m Zocor 10mg daily, 8:00p.m	8-7-08, 6:00p.m not given or documented as given Not given or documented as given, indicated the tenant was in the hospital, whereas the tenant returned to the program at 7:20p.m per nurse's notes.
	Tramadol 25mg three times daily	9-27-08, 10:00p.m not given or documented as given

- **Regulatory Insufficiency:** The administration of medications shall be provided by an Iowa-licensed registered nurse or advanced registered nurse practitioner registered in Iowa or the authorized agent in accordance with 655---subrule 6.2(5) and 655---subrule 6.3(1) and Iowa Code chapter 155A and in executing the medical regimen as prescribed by the physician, the registered nurse shall exercise professional judgment in accordance with minimum standards of nursing practice as defined in these rules: 25.29(2)a, 655-6.2(5)e(152).

Dated this 17th day of November, 2008.