

INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

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PATTY JUDGE
LT. GOVERNOR

January 29, 2009

Kathleen Jacobsen, Resident Services Director
Cottage Grove Place
2115 1st Ave SE
Cedar Rapids, IA 52402-6353

RE: Recertification Monitoring Evaluation Report, Cottage Grove Place, Cedar Rapids, IA

Dear Ms. Jacobsen:

Enclosed is the **Recertification Monitoring Evaluation Report** completed by the Department of Inspections and Appeals (DIA) pursuant to the Code of Iowa Chapter 231C and the Iowa Administrative Code Chapter 25. **No Regulatory Insufficiencies were found during this evaluation.**

The review of the recertification documents you submitted has been completed and 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 **#S0035** with effective dates of **February 5, 2009** through **February 4, 2011**. This certificate must be posted in the building for public viewing.

If you have any questions regarding this certification, please contact me at 515-281-4116.

Sincerely,



Chris Nothatt
Certification Coordinator – Eastern Iowa
Adult Services Bureau

Enclosure

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

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

Assisted Living Program:

Kathleen Jacobsen, Resident Services Director
Cottage Grove Place
2115 1St Ave SE
Cedar Rapids, IA 52402-6353

Date of Monitoring Visit:

January 13, 2009

Monitor(s):

Stephanie Cummins, MA

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 Cottage Grove Place on January 13, 2009. 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:	12
Current number of tenants with cognitive disorder:	2
Total Population:	14

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 nine tenants was held. The tenants do not have concerns with housekeeping, laundry or maintenance. They state staffing is sufficient to meet their needs and describe staff as excellent. Staff answers their requests for assistance promptly and there are no recent issues with the staff response overnight. The tenants describe the food as excellent and one tenant states there has not been a bad meal in a year. They enjoy the choices offered at meals but state the portions are too large. The temperature and quality of the food is appropriate, according to the tenants. There are sufficient activities offered and there is plenty to do if a tenant chooses to participate. Tenants enjoy Bingo and exercises. They receive a calendar and state the activities for the day are listed on the board. The tenant's feel safe and they have routine fire drills. Tenants report they make their own decisions and the nurse is available when needed. They are satisfied living at the program and would recommend it to others. One tenant states he/she has recommended the program to others.

Program History – There was one substantiated Regulatory Insufficiency in the last certification period in the area of Nurse Review.

On-Site Monitoring Evaluation – The monitor(s) made the observations detailed in the following areas. **There were no regulatory insufficiencies during this on-site recertification monitoring evaluation.**

Dated this 27th day of January, 2009.