IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

April 13, 2009

Michael Weih, Administrator
Lincolnway Villa Assisted Living
PO Box 369
Wheatland, IA 52777-0369

RE: Recertification Monitoring Evaluation Report, Lincolnway Villa, Wheatland, IA

Dear Mr. Weih:

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 **#S0171** with effective dates of **April 14, 2009** through **April 13, 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 Nothaft
Certification Coordinator – Eastern Iowa
Adult Services Bureau

Enclosure

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

Assisted Living Program:

Michael Weih, Administrator
Lincolnway Villa Assisted Living
PO Box 369
Wheatland, IA 52777-0369

Date of Monitoring Visit:

April 1, 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 Lincolnway Villa Assisted Living on April 1, 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:	17
Current number of tenants with cognitive disorder:	0
Total Population:	17

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 13 tenants and 1 tenant interview were held. Tenants do not have any concerns with housekeeping, laundry or maintenance. They describe staff as good and friendly and state there are enough staff to meet their needs. Tenants report the staffing is different on the weekends; however, their needs are met. Staff responds quickly when they call for assistance and they do not have any concerns with staff response from the nursing home after hours. Tenants report the Director did a good job of taking care of everyone when several tenants had the flu. They state two meals a day are served, there is too much wasted food and the temperatures of the french fries, soup and rolls need improvement. Tenants report the quality of the pre-cooked meat needs improvement and they prefer foods made from scratch. One tenant requested more fruit, including applesauce. Tenants receive a tray meal when not feeling well and can have visitors for meals. Tenants receive an activity calendar and state the calendar and menu are also in the local newspaper. Tenants state sufficient activities are offered. One tenant requested more exercises and one tenant suggested more card games. They enjoy Bingo, music, outings, Bible study and church services. Tenants state they feel safe and they do not have any personal belongings missing. They have routine fire drills and the alarms are loud enough to hear. Tenants report they are getting what they signed up for at admission and they make their own decisions. They state the nurse is available when needed. Tenants are satisfied living at the program and would recommend it to others. One tenant states it is his/her home away from home.

Program History – There were no substantiated Regulatory Insufficiencies this past certification period.

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

Dated this 10th day of April, 2009.