

INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

DEAN A. LERNER, DIRECTOR

PATTY JUDGE
LT. GOVERNOR

June 10, 2009

Jennifer Smith, Administrator
Garnett Place Retirement Community
202 35th Street Dr. SE
Cedar Rapids, Iowa 52403-1353

RE: Recertification Monitoring Evaluation Report, Garnett Place Retirement Community, Cedar Rapids, IA

Dear Ms. Smith:

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 **#S0113** with effective dates of **May 4, 2009** through **May 3, 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 Nothhaft
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:

Jennifer Smith, Administrator
Garnett Place Retirement Community
202 35th Street Dr. SE
Cedar Rapids, Iowa 52403-1353

Date of Monitoring Visit:

June 2, 2009

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 Garnett Place Retirement Community on June 2, 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: 23

Current number of tenants with cognitive disorder: 0

Total Population: 23

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 13 tenants. Tenants stated the living environment is wonderful with no concerns. Staff are very nice with requests for assistance being responded to in less than 5 minutes. Food at the program is very good with plenty offered and substitutes available. Tenants stated they could think of nothing the Administration or staff could do to make the program better. They stated activities are very good, they feel safe in the program and they participate in fire drills. They are receiving the services as expected and are aware of any limitations. Tenants stated they make their own decisions and come and go as they please, without restrictions. They are satisfied with the medical services provided. Tenants are generally satisfied with the program and would recommend it to friends and family members. No other concerns were presented.

Program History – There were substantiated Regulatory Insufficiencies this certification period in the areas of: Medications and Staffing. There were substantiated Regulatory Insufficiencies at the previous recertification visit in the areas of: Service Plans and Food Service.

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

At the time of the monitoring visit the program was found to be in substantial compliance with the regulations. No Regulatory Insufficiencies were found.

Dated this 10th day of June, 2009.