

INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

DEAN A. LERNER, DIRECTOR

PATTY JUDGE
LT. GOVERNOR

June 17, 2009

Laura Spengler, Administrator
Prairie Hills Senior Services
219 S Cedar St
Tipton, IA 52772-1764

RE: Recertification Monitoring Evaluation Report, Prairie Hills Senior Services, Tipton, IA

Dear Ms. Spengler:

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. **UPON RECEIPT OF THE UPDATED FOOD SERVICE LICENSE, PLEASE SUBMIT A COPY!**

Enclosed you will find the Assisted Living Program Certificate **#S0213** with effective dates of **July 1, 2009 through June 30, 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:

Laura Spengler, Administrator
Prairie Hills Senior Services
219 S Cedar St
Tipton, IA 52772-1764

Date of Monitoring Visit:

June 9, 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 Prairie Hills Senior Services on June 9, 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:	42
Current number of tenants with cognitive disorder:	1
Total Population of GPP:	43

Dementia Specific Program (DSP)* – A program that is dementia specific and provides specialized care in a dedicated setting.

Total Population of DSP:	7
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Total Census of ALP: 50

***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 24 tenants was held. Tenants stated the common areas and their apartments were cleaned appropriately, the current laundry person did a good job and maintenance repaired things quickly. They described staff as marvelous and great and one tenant applauded staff. There was sufficient staff to meet tenant's needs and staff knocked before they entered their apartments. Tenants said staff responded quickly and "come running" when they called for assistance. They felt staff were well trained; however, one tenant stated some of the young staff needed more training. The nurse was available and had even come in on the weekends. The food at the program was good and breakfast was made to order. The quality and temperature of food was appropriate but too much food was served. Tenants stated they could ask for second portions and they had a salad bar several times a week. Tenants wanted a clarification of what time the doors were locked each day. Tenants received a schedule of activities and stated plenty of activities were offered. They enjoyed Bingo, musical entertainment and exercises and stated they could decline to participate if they wanted. They felt safe and had routine fire drills. The tenants said they were getting what they signed up for upon admission and they made their own decisions. They were satisfied with the program and would recommend it to others. One tenant stated he/she would describe the place as "pleasant." Tenants enjoyed not having to cook or clean.

Program History – There was a substantiated Regulatory Insufficiency this past certification period in the area of Other.

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 17th day of June, 2009.