

INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

DEAN A. LERNER, DIRECTOR

PATTY JUDGE
LT. GOVERNOR

July 27, 2009

Jenny Knust, Assisted Living Director
Wesley Acres – John's Harbor Assisted Living
3520 Grand Ave.
Des Moines, IA 50312-4359

RE: Recertification Monitoring Evaluation Report, Wesley Acres-John's Harbor Assisted Living, Des Moines, IA

Dear Ms. Knust:

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 #S0117 with effective dates of **June 21, 2009 through June 20, 2011.** This certificate must be posted in the building for public viewing.

If you have any questions regarding this certification, please contact me at 515-281-5003

Sincerely,

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

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:

Jenny Knust, Assisted Living Director
Wesley Acres – John’s Harbor Assisted Living
3520 Grand Ave.
Des Moines, IA 50312-4359

Date of Monitoring Visit:

June 8, 2009

Monitor(s):

Hal L. Chase, RN BSN MPH
Joyce Kix, RN
Ann Martin, 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 Wesley Acres – John’s Harbor Assisted Living on June 8, 2009. In preparing this report, the following information was considered.

Current Program Census:

General Population Program (GPP)* – Not applicable.

Dementia Specific Program (DSP)* – A program that is a Dementia Specific Program by definition but may have tenants without cognitive disorder

Current number of tenants in a DSP that serves 5 or more tenants with dementia or cognitive disorder staged between 4 and 7 on the Global Deterioration Scale (GDS): 13

Current number of tenants without cognitive disorder: 2

Total Population: 15

***These are the census numbers represented by the program to be applicable at the time of the on-site.**

Tenant/Family Satisfaction Results – Observations were made during the on-site recertification. Tenant's apartments were clean, neat and well kept. Tenants were observed during lunch and commented the food was good, served hot and with a variety of foods offered. Staff were engaging and supportive of tenants' needs during lunch. Tenants stated there were plenty of activities offered and stated they had a full-time activities person. Tenants stated they were receiving the services and cares they needed. Two tenants stated they were satisfied with the program.

Program History – There have not been any substantiated Regulatory Insufficiencies during this recertification period.

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

Dated this 17th day of June, 2009