IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

December 16, 2009

Ms. Amy Pagel, Administrator
Traditions of West Union Assisted Living
609 Hwy. 150 North
West Union, IA. 52175-1057

RE: Recertification Monitoring Evaluation Report, Traditions of West Union Assisted Living, West Union, IA

Dear Ms. Pagel:

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 have 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 **#S0265** with effective dates of **November 26, 2009** through **November 25, 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:

Ms. Amy Pagel, Administrator
Traditions of West Union Assisted Living
609 Hwy. 150 North
West Union, IA. 52175-1057

Date of Monitoring Visit:

December 8, 2009

Monitor(s):

Hal L. Chase, RN BSN MPH

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 Traditions of West Union Assisted Living on December 8, 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:	34
Current number of tenants with cognitive disorder:	3
Total Population of GPP:	37

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

Total Population of DSP:	10
Total Census of ALP:	47

***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 in the dining room with 32 tenants in attendance. Tenants stated the program was a nice place to live. Tenants stated staff have worked at the program for a long time, were polite, courteous and knew the services they needed in personal and health related cares. Tenants stated the food was good, but would like to have more variety fresh fruits and vegetables. Tenants stated there were enough activities offered throughout the week Tenants stated they felt safe and were getting the services they expected. Tenants stated they made their own decisions. Tenants stated staff responds within five minutes of being called. Tenants stated they would like the program to provide transportation. Tenants stated they are generally satisfied with the program and would recommend the program to friends and family.

Program History – There were substantiated Regulatory Insufficiencies this certification period in the areas of Evaluation of Tenants, Service Plans and Other (lack of DIA notification within 24 hours).

The June 10, 2009 Incident Investigation resulted in a civil penalty of $500.00 with Regulatory Insufficiencies in the areas of Evaluation of Tenants, Service Plans and Other (lack of DIA notification within 24 hours).

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

Dated this 16th day of December, 2009.