IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

DEMAND LETTER
CERTIFIED

January 27, 2010

Janet Woodruff, Administrator
Spring Valley Retirement Community
501 12th Street
Perry, IA 50220-1913

RE: I. Final Recertification Monitoring Evaluation Report, Spring Valley Retirement Community, Perry, IA
II. Appeals/Hearings
III. Civil Penalty
IV. Standard Certification
V. Conclusion

Dear Ms. Woodruff:

I. Final Recertification Monitoring Evaluation Report, Spring Valley Retirement Community, Perry, IA

Enclosed is the **Final Recertification Monitoring Evaluation Report** completed by the Department of Inspections and Appeals (DIA) in accordance with Iowa Code chapter 231C, 321 Iowa Administrative Code chapter 25 (pertaining to assisted living programs), and 321 Iowa Administrative Code chapter 26 (pertaining to monitoring, civil penalties, and complaints). The report notes Regulatory Insufficiency in the area of Other. Spring Valley Retirement Community. Spring Valley Retirement Community is being assessed a $500.00 civil penalty.

DIA is accepting the Plan of Correction (POC) submitted.

ii. Appeals/Hearings

The Program may appeal the DIA decision in accordance with 321 Iowa Administrative Code rule 26.4, within 30 days of notice, by submitting a request for appeal to DIA. A contested

case hearing will be held pursuant to 481 Iowa Administrative Code chapter 10. If the Program appeals, the civil penalty will be suspended, pending appeal process.

III. Civil Penalty

If, within thirty (30) days of the receipt of this demand letter, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty-five percent (35%) pursuant to Iowa Code section 231C.14. If you do not wish to request a formal hearing or wish to withdraw your request for formal hearing, please send written notice to the Certification Coordinator and remit the penalty assessed by check or money order in the amount of three hundred twenty five dollars ($325.00) within 30 business days after the receipt of this demand letter.

IV. Standard Certification

Also enclosed you will find the Assisted Living Program Certificate with effective dates of **November 20, 2009 through November 19, 2011**.

V. Conclusion

The Program is being assessed a $500.00 civil penalty. The Plan of Correction that was submitted is accepted.

DIA may revisit the Program to confirm compliance in fulfilling the POC's corrective measures. If the Program wishes to appeal or request a hearing on the final findings, the Program may do so within 30 days of this letter.

If you have any questions regarding this certification, please contact your Certification Coordinator, Connie Schaffer, at 515-281-5003.

Sincerely,

Ann Martin

Ann Martin, Bureau Chief
Adult Services Bureau

Enclosure

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

Assisted Living Program:

Janet Woodruff, Administrator
Spring Valley Retirement Community
501 12th Street
Perry, IA 50220-1913

Date of Monitoring Visit:

November 30, 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 Spring Valley Retirement Community on November 30, 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:	32
Current number of tenants with cognitive disorder:	4
Total Population:	36

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 24 tenants attending. Tenants stated housekeeping staff did a "very" good job cleaning their apartment. Staff will knock before entering their apartment and staff are helpful, patient and were trained well. Tenants stated there was plenty of food offered and the food was good. Tenants stated they would like more entertainment from music bands. Tenants stated they felt safe living at the program and received the services they expected. Tenant stated they make their own decisions and would recommend the program to friends.

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.

A. Other – The provisions of this section address the program's noncompliance with other applicable statutory and administrative rule requirements.

Monitoring Observation: Tenant #2, a 92 year old, was admitted on 6-4-04, with diagnoses of: Celiac Disease, Arthritis, Gastro Esophageal Reflux Disease, Hypertension (HTN) and Insomnia. An incident report of 10-30-09 indicated the tenant was standing and taking dead leaves from the plants; felt dizzy and fell onto his/her left side. Nurse's notes of 10-30-09 indicated the tenant complained of left hip and leg pain. The tenant was sent to a local hospital emergency room. Nurse's notes of 11-3-09 indicated the tenant had a broken hip.

Tenant #4, a 90 year old, was admitted on 8-19-04, with diagnoses of: HTN, Osteoporosis, History of a Hemorrhoidectomy and Esophagitis. An incident report of 10-31-09 indicated the tenant had fallen in the kitchen of his/her apartment and had complained of left leg and ankle pain. The tenant was sent to a local hospital emergency room. Nurse's notes of 10-31-09 indicated the tenant sustained a broken hip and was transferred to another hospital.

- Regulatory Insufficiency: The program did not notify the Department of Inspections and Appeals within twenty-four hours, by most expeditious means available, of any accident causing substantial injury or death, and any fire or natural or other disaster occurring at or near the assisted living program. (231C.12)

Dated this 27th day of January, 2010.