IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

DEMAND LETTER
CERTIFIED

February 10, 2010

Ms. Laura Hansen, RN
Elm Crest Retirement Community
2104 12th Street
Harlan, IA 51537

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

Dear Ms. Hansen:

I. Final Recertification Monitoring Evaluation Report, Elm Crest Retirement Community, Harlan, 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 and Iowa Administrative Code (IAC) chapters 481—67 and 481—69. The report notes Regulatory Insufficiencies in the areas of: Staffing and Structural Requirements. Elm Crest Retirement Community (Program) is being assessed a $1,000.00 civil penalty.

DIA is accepting the Plan of Correction (POC). Based on the information provided in the Request for Reconsideration, DIA denies your request due to unsatisfactory fire drills held when tenants could reasonably be expected to be sleeping.

II. Appeals/Hearings

The Program may appeal the DIA decision in accordance with IAC rule 481—67.13 within 30 days of notice, by submitting a request for appeal to DIA. Hearings will be held pursuant to

IAC chapter 481—10. If the Program appeals, the civil penalty will be suspended, pending appeal. If the program does not appeal, the fine is due within 30 days of notice.

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 IAC chapter 67.12(3)d. 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 six hundred fifty dollars ($650.00) 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 **January 30, 2010 through January 29, 2012**.

V. Conclusion

The Program is being assessed a $1,000.00 civil money penalty. 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 letter and report, please contact your Certification Coordinator, Tamara Halvorson, at 515-281-5721.

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:

Elm Crest Retirement Community
Laura Hansen, RN
2104 12th Street
Harlan, IA 51537

Date of Monitoring Visit:

January 6, 2010

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. IAC r. 481-67.10(5). 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 481 IAC chapter 69 that: serves fewer than fifty-five (55) tenants and has five (5) or more tenants who have dementia between Stages 4 and 7 on the Global Deterioration Scale or serves 55 or more tenants and 10 percent or more of the tenants have dementia between Stages 4 and 7 on the Global Deterioration Scale or holds itself out as providing specialized care for persons with dementia, such as Alzheimer's disease, in a dedicated setting.

Overview:

An on-site monitoring evaluation was conducted at Elm Crest Retirement Community on January 6, 2010. 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:	26
Current number of tenants with cognitive disorder:	3
Total Population:	29

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 28 tenants. Tenants stated living at the program was almost as nice as living in their own home. The program nurse trained the staff and staff were patient and quick to respond when called upon. There were a variety of activities offered. They felt safe, made their own decisions and were receiving the services they expected. The program offers a variety of food and most of the tenants stated they liked the food. Tenants stated hot foods are always served hot and cold foods served cold. They are satisfied with the program and would recommend the program to a friend or family member.

Program History – There were no substantiated Regulatory Insufficiencies found during this certification period.

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

A. Staffing

Monitoring Observation: Service plans for Tenant #1 and Tenant #2 indicated they need staff assistance with personal and health related cares. A review of personnel files for Staff #2 and #3 indicated they did not have documentation of nurse delegated training for personal and health related cares given to tenants.

- Regulatory Insufficiency: The owner or management corporation of the program is responsible for ensuring that all personnel employed by or contracting with the program receive training appropriate to assigned tasks and target population. IAC r. 481-69.29(3).

B. Structural requirements

Monitoring Observation: Program records indicated seven fire drills were conducted between 1-30-09 and 11-30-09. Two of the fire drills were silent fire drills when tenants were sleeping and tenants did not participate in the fire drills.

- Regulatory Insufficiency: The program did not conduct emergency egress and relocation drills not less than six times per year on a bimonthly basis, with not less than two drills conducted during the night when tenants are sleeping. IAC r. 481-69.35(1).

Dated this 10th day of February, 2010.