IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

March 3, 2010

Carri Stone, Administrator
Maple Ridge Assisted Living
2102 S. Market
Oskaloosa, IA 52577-4071

Dear Ms. Stone:

The Department of Inspections and Appeals (DIA) has completed the review of the Assisted Living Program recertification requirements for your program.

The review of the recertification documents you submitted has been completed and the documents are accepted. In addition, the State Fire Marshall's (SFM) inspection report has been received as well as the Facility Engineer's approval of the Evacuation Plans for your program. The Recertification Monitoring Evaluation report was previously sent to your program.

All recertification requirements have been completed. Enclosed you will find the Assisted Living Program Certificate # **S0186** with effective dates of **February 23, 2010** through **February 22, 2012.** This certificate must be posted in the building for public viewing.

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

Sincerely,

Connie Schaffer

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

Enclosure

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

Assisted Living Program:

Carri Stone, Administrator
Maple Ridge Assisted Living
2102 S. Market
Oskaloosa, IA 52577-4071

Date of Monitoring Visit:

February 3, 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 Maple Ridge Assisted Living on February 3, 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:	63
Current number of tenants with cognitive disorder:	2
Total Population of GPP:	65

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

Total Population of DSP:	7
Total Census of ALP:	72

***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 62. Tenants stated the program was a nice place to live. They enjoyed living there and indicated the only improvement needed was to reduce the noise of the heaters in their apartments. The manager would listen to their concerns when they had any. Staff were polite, courteous and trained to provide the services needed. Nursing services were available and staff, when called, responded to their calls within five minutes. Tenants liked the food served and given a variety of fruits and vegetables. There were enough activities offered and activities for tenants with dementia. Tenants stated they felt safe, were getting the services they expected and made their own decisions and knew their right. Tenants stated they are generally satisfied with the program and would recommend it to friends and family.

Program History – There have been no 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 during this onsite investigation.

Dated this 10th day of February, 2010