

INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

DEAN A. LERNER, DIRECTOR

PATTY JUDGE
LT. GOVERNOR

March 15, 2010

Ms. Jenny Knust, Administrator
Wesley Acres Central Assisted Living
3520 Grand Avenue
Des Moines, IA 50312

RE: Final Recertification Monitoring Evaluation Report, Wesley Acres Central Assisted Living, Des Moines, IA

Dear Ms. Knust:

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 the Iowa Administrative Code (IAC) chapters 481-67 and 481-69. **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 **#S0075** with effective dates of **April 5, 2010 through April 4, 2012**. 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

Enclosure

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, Administrator
Wesley Acres Central Assisted Living
3520 Grand Avenue
Des Moines, IA 50312-4359

Date of Monitoring Visit:

March 4, 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 Wesley Acres Central Assisted Living on March 4, 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:	44
Current number of tenants with cognitive disorder:	3
Total Population:	47

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 37 tenants. Tenants stated the program was their home, they felt safe and were getting the services they expected. Staff were polite, courteous and trained to provide the services needed. The manager listened to their concerns and finds the solutions when needed. Nursing services are available and staff responded within ten minutes of being called. Tenants made their own decisions and were aware of their rights. A good variety of fresh fruits and vegetables were offered and tenants enjoy the food. Tenants stated there was plenty of activities offered, but would like to play more bingo. Tenants are generally satisfied with the program and would recommend it to anyone.

Program History – There were substantiated Regulatory Insufficiencies found in the areas of Occupancy Agreement, Evaluation of Tenant, Criteria for Exclusion of Tenant, Service Plans, and Medications during this certification period.

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

Dated this 16th day of March, 2010.