IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

March 29, 2010

Leland Smith Assisted Living
Ms. Shelly Wicks, Administrator
309 Ovesen Drive
Wilton, IA 52778-9605

RE: Recertification Monitoring Evaluation Report, Leland Smith Assisted Living, Wilton, IA

Dear Ms. Wicks:

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 chapters 67 and 69. **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 **#S0187** with effective dates of **March 19, 2010** through **March 18, 2012.** This certificate must be posted in the building for public viewing.

If you have any questions regarding this certification, please contact me at 515-281-4116.

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:

Leland Smith Assisted Living
Ms. Shelly Wicks, Administrator
309 Ovesen Drive
Wilton, IA 52778-9605

Date of Monitoring Visit:

March 24, 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 Leland Smith Assisted Living on March 24, 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:	23
Current number of tenants with cognitive disorder:	0
Total Population:	23

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 19 tenants in attendance. Tenants stated the program was their home, they felt safe and were getting the services they expected. Staff were polite, courteous, were trained to provide the services needed and the manager listened to their concerns and found solutions when needed. Nursing services were available and staff responded within five minutes of being called. Tenants stated they were really impressed with the nursing staff. Tenants made their own decisions and were aware of their rights. A good variety of fresh fruits and vegetables were offered and tenants liked the food. Tenants stated there were plenty of activities but they would like to play more bingo. Tenants are generally satisfied with the program and would recommend the program to others.

Program History – There were substantiated Regulatory Insufficiencies this past certification period in the areas of: Evaluation of Tenants, Service Plans, Medications, Nurse Review, Staffing and Other (lack of providing health, safety and well-being of tenants).

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 29th day of March, 2010