

INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

DEAN A. LERNER, DIRECTOR

PATTY JUDGE
LT. GOVERNOR

DEMAND LETTER CERTIFIED

April 5, 2010

Ms. Di Smith, Housing Manager
Arlington Place of Red Oak
800 East Ratliff Road
Red Oak, IA 51566

- RE: I. Final Recertification Monitoring Evaluation Report**
II. Civil Penalty
III. Appeals/Hearings
IV. Standard Certification
V. Conclusion

Dear Ms. Smith:

I. Final Recertification Monitoring Evaluation Report – Arlington Place of Red Oak, Red Oak, 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 the Regulatory Insufficiency in the area(s) of: Record Checks. Arlington Place of Red Oak("Program") is being assessed a \$500 civil penalty.

DIA is accepting the Plan of Correction (POC) following the program's submission of information.

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II. 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 in accordance with IAC 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 three hundred twenty five (\$325) within 30 business days after the receipt of this demand letter.

III. Appeals/Hearings

The Program may appeal the DIA decision in accordance with IAC rule 481—67.13 within 30 days of this notice, by submitting a request for appeal to DIA. A contested case hearing will be held pursuant to IAC chapter 481—10. If the Program appeals, the civil penalty will be suspended, pending the appeal process. If the program does not appeal, the fine is due within 30 days of notice.

IV. Standard Certification

Enclosed you will find the Assisted Living Program Certificate S0137 with effective dates of February 28, 2010 through February 27, 2012.

V. Conclusion

The Program is being assessed a \$500 civil penalty. The POC submitted on March 30, 2010, has been reviewed and will constitute the final POC related to the on-site visit of March 9, 2010.

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 in regard to 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:

Di Smith, Housing Manager
Arlington Place of Red Oak
800 E. Ratliff Road
Red Oak, IA 51566

Date of Monitoring Visit:

March 9, 2010

Monitor(s):

Michael Streepy, RN

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 Arlington Place of Red Oak on March 9, 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:	22
Current number of tenants with cognitive disorder:	4
Total Population:	26

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 4 tenants. The tenants stated the living environment is nice. Staff are nice, compassionate, well trained and provide appropriate services. There is room for improvement with the food at the program. While a good variety is offered at appropriate temperatures and substitutes are available, the tenants feel that too much starch is provided. The tenants stated the activities are very good but they would like more trips. They feel safe and participate in fire drills. They are receiving services as expected in their occupancy agreements. The tenants were aware of limitations to occupancy at the program. They make their own decisions without restriction. The tenants were satisfied with medical services and nursing availability and stated staff respond to requests for assistance within a few minutes. The tenants stated general satisfaction with the program and stated they would recommend it to friends and family members

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. Record Checks

Monitoring Observation: Review of personnel records revealed the following:

Staff #1, a Universal Worker with a hire date of 08-07-09, had no documentation of criminal background check prior to hire.

Staff #2, a Dietary Manager with a hire date of 08-10-09, had no documentation of criminal background check prior to hire.

Staff #3, a Universal Worker with a hire date of 09-23-09, had no documentation of criminal background check prior to hire.

- Regulatory Insufficiency: Pursuant to Iowa Code section 135C.33, a prospective employee of a program shall have a criminal history check, dependent adult abuse check, and child abuse check performed before the prospective employee begins work. If a prospective employee has a criminal history or abuse history, the prospective employee shall not be employed by the program unless the department of human services has performed an evaluation and determined that the record does not warrant the employment prohibition. Proof of the preemployment background check shall be maintained in the program's employment file. The program must meet all requirements of Iowa Code section 135C.33 and administrative rules adopted pursuant to Iowa Code section 135C.33. (IAC r. 481-67.9(3))

Dated this 23rd day of March, 2010.