IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

April 7, 2010

Mr. Jonathan Moe, Administrator
Valley Lodge Assisted Living
1118 E. Highway 20
Correctionville, IA 51016

RE: Final Recertification Monitoring Evaluation Report – Valley Lodge Assisted Living, Correctionville, IA

Dear Mr. Moe:

Enclosed is the **Final Recertification Monitoring Evaluation Report** completed by the Department of Inspections and Appeals (DIA) in accordance with Iowa Code chapters 231C and 235E and the Iowa Administrative Code (IAC) chapters 481—52, 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 **S0140** with effective dates of **April 10, 2010** through **April 9, 2012.**

If you have any questions regarding this certification, please contact me at 515/281-5721.

Sincerely,

Tamara Halvorson

Tamara Halvorson
ASB Lead Certification Coordinator
Adult Services Bureau

Enclosure

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

Assisted Living Program:

Jonathan Moe, Administrator
Valley Lodge Assisted Living
1118 E. Highway 20
Correctionville, IA 51016

Date of Monitoring Visit:

April 5, 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 Valley Lodge Assisted Living on April 5, 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:	2
Current number of tenants with cognitive disorder:	0
Total Population:	2

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 Interview: A community meeting was held with one of the two tenants. The tenant stated the living environment is really good, a nice place to live and well maintained. Staff are polite, courteous and well trained to provide services. The food is good with plenty offered at proper temperatures. Activities are good with a variety offered. The tenant stated he/she felt safe in the program. The tenant is receiving services as expected in the occupancy agreement and maybe more. The tenant was aware of limitations to staying in the program. The tenant makes his own decisions, comes and goes as he/she pleases without restriction, and is aware of his/her rights. The tenant stated satisfaction with medical services and stated staff respond right away to requests for assistance. The tenant stated satisfaction with the program and 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. **At the time of the monitoring visit the program was found to be in substantial compliance with the regulations.**

Dated this 7th day of April, 2010.