IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

DEMAND LETTER
CERTIFIED

May 6, 2010

Ms. Mary Keen, Director
Bickford Cottage of Marshalltown
101 Newcastle Road
Marshalltown, IA 50158

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

Dear Ms. Keen:

I. Final Recertification Monitoring Evaluation Report – Bickford Cottage of Marshalltown, Marshalltown, IA

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 Iowa Administrative Code (IAC) chapters 481—52, 481—67 and 481—69. The report notes the Regulatory Insufficiencies in the area(s) of: Food Service and Record Checks. Bickford Cottage of Marshalltown("Program") is being assessed a $500 civil penalty.

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

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 cover letter to the attention of **Tamara Halvorson** and remit the penalty assessed by check or money order in the amount of three hundred twenty five dollars ($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 **S0012** with effective dates of **May 6, 2010** through **May 5, 2012**.

V. Conclusion

The Program is being assessed a $500 civil penalty. The POC submitted on May 6, 2010, has been reviewed and will constitute the final POC related to the on-site visit of April 7, 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:

Mary Keen, Director
Bickford Cottage of Marshalltown
101 Newcastle Road
Marshalltown, IA 50158

Date of Monitoring Visit:

April 7, 2010

Monitor(s):

Joyce Kix, 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 Bickford Cottage of Marshalltown on April 7, 2010. In preparing this report, the following information was considered:

Current Program Census:

General Population Program (GPP)* – Not applicable.

Dementia Specific Program (DSP)* – A program that is a Dementia Specific Program by definition but may have tenants without cognitive disorder.

Current number of tenants in a DSP that serves fewer than 55 tenants and has 5 or more tenants who have dementia between Stages 4 and 7 on the Global Deterioration Scale (GDS):	9
Current number of tenants without cognitive disorder:	19
Total Population:	28

***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 15 tenants. The tenants reported the program was a nice place to live where they felt safe. Staff were friendly, respectful and call lights were answered within five minutes. The tenants said the program provided plenty of activities. They stated that at times, the soup was not served hot but the food was plentiful and staff warmed the food at their request. The tenants said they were generally satisfied with the program and would recommend it to friends.

Program History – There was a substantiated Regulatory Insufficiency in the area of Other (tenant rights and notification within 24 hours of substantial injury to the department) during this certification period.

On-Site Monitoring Evaluation – The monitor made the observations detailed in the following areas.

A. Food Service

Monitoring Observation: Four staff files were reviewed. Staff #3's personnel file contained documentation of food safety training 3-4-08 and Staff #4's personnel file documented food safety training 11-24-08. Both files lacked evidence of annual in-service training on food safety. Staff #2 did not have orientation on safe food handling prior to handling food. Staff #1, the Dietary Manager, was scheduled to complete training for ServSafe Certification 4-13-2010.

The Director stated that Staff #2 worked third shift and did not ordinarily serve food as part of her job duties but she did not know whether Staff #2 had worked other shifts when food service was part of the job.

- Regulatory Insufficiency: Personnel who are employed by or contract with the program and who are responsible for food preparation or service, or both food preparation and service, shall have an orientation on sanitation and safe food handling prior to handling food and shall have an annual in-service training on food protection. (IAC 481 r. 69.28 (5))

B. Record Checks

Monitoring Observation: Four staff files were reviewed. Staff #1 was hired 1-14-10. The personnel file lacked evidence of completion of a criminal background check until 1-26-10.

Staff #3 was hired 11-24-09. The criminal background check was not completed until 11-25-09.

The Director reported she was aware that an appropriate background evaluation had not been conducted on Staff #1 and had it completed on 1-26-10.

- Regulatory Insufficiency: Pursuant to Iowa code section 135C.33, a prospective employee of a program shall have a criminal history check, dependent adult abuse, and child abuse check performed before the prospective employee starts work. If a prospective employee has a criminal history or an 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 pre-employment background check shall be maintained in the program's employee file. The program must meet all requirement of Iowa code 135C 33 and Administrative rules adopted pursuant to Iowa Code section 135C 33. (IAC 481 r. 67.9 (3))

Dated this 15th day of April 2010.