

CHESTER J. CULVER
GOVERNOR

DEAN A. LERNER, DIRECTOR

PATTY JUDGE
LT. GOVERNOR

September 9, 2010

Mr. Edmund Osby, Administrator
The Oaks Assisted Living
2235 Highway 34
Fairfield, IA 52566-8634

RE: Final Recertification Monitoring Evaluation Report – The Oaks Assisted Living, Fairfield, IA

Dear Mr. Osby:

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.

DIA has completed the review of your Plan of Correction (POC) in response to the Preliminary Recertification Monitoring Evaluation Report. Based upon a complete review of the Report and your actions to correct the identified a Regulatory Insufficiency, DIA accepts your POC. The Final report is enclosed.

The review of the recertification documents you submitted has been completed and the documents 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 S0276 with effective dates of **June 13, 2010 through June 12, 2012.**

If you have any questions in regard to this certification, please contact me at 515/281-7039.

Sincerely,

Rose Boccella

Rose Boccella
Program Coordinator
Adult Services Bureau
Enclosure

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

Assisted Living Program:

Edmund Osby, Administrator
The Oaks Assisted Living
2235 Hwy 34
Fairfield, IA 52556-8634

Date of Monitoring Visit:

August 18, 2010

Monitor(s):

Stephanie Cummins, MA

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 The Oaks Assisted Living on August 18, 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:	4
Current number of tenants with cognitive disorder:	0
Total Population:	4

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 with three tenants was held. The tenants did not have any issues with housekeeping, maintenance or laundry. They reported staff responded quickly when they called for assistance. There were no issues with staff response from the attached nursing facility. The tenants stated they were receiving the cares they required and medications were administered on time. The food was reasonably good; however, at times the temperature of the food and meat tenderness needed improvement. One tenant requested more variety of vegetables. The tenants requested more seating in the front of the building. They received an activity calendar and enjoyed Bingo, music and going to the beauty shop. The tenants felt safe and reported they received all the services they required. They made their own decisions and the nurse was available. The tenants were satisfied living at the program and would recommend it to others. The tenants stated they wanted more tenants to move into the program.

Program History – There have been no substantiated Regulatory Insufficiencies during this recertification period.

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

A. Food Service

Monitoring Observation: Four staff files were reviewed. Staff #1 and #2 did not have an annual in-service training on food protection. The last in-service training on food safety and sanitation for Staff #1 and #2 was completed on 2-25-09. Staff #3 was hired on 5-28-10 and did not have an orientation on sanitation and safe food handling prior to handling food.

- 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 annual in-service training on food protection. (IAC r.481-69.28(5))

Dated this 27th day of August, 2010.