IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

November 5, 2010

Ms. Teresa Krueger, Director
Linden Place Assisted Living
1802 5th Avenue NW
Waverly, IA 50677

RE: Final Recertification Monitoring Evaluation Report – Linden Place Assisted Living, Waverly, IA

Dear Ms. Krueger:

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 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 **S0088** with effective dates of **July 7, 2010** through **July 6, 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

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

Assisted Living Program:

Teresa Krueger, Director
Linden Place Assisted Living
1802 5th Ave. NW
Waverly, IA 50677

Date of Monitoring Visit:

October 20, 2010

Monitors:

Lori Miner, RN BSN
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 Linden Place Assisted Living on October 20, 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:	31
Current number of tenants with cognitive disorder:	0
Total Population:	31

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 28 tenants. The tenants unanimously stated the program was a nice place to live. They reported the staff were knowledgeable and responded to calls within five minutes. The tenants said the food at the program was very good and there were plenty of activities offered. Crafts and trips to the country were favorite activities. The tenants felt safe and would recommend the program to friends and family.

Program History – The program received no regulatory insufficiencies during this certification period.

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

A. Medications

Monitoring Observation: The program policy for Medication Management directed staff to administer medications within one hour before to one hour after the scheduled time. During observation of medication administration on 10-20-10, the monitor made the following observations:

Tenant	Medication	Time Ordered	Observation
#1	Sertraline HCL 100mg	8:00 am	Administered at 10:00 am
#1	Metoprolol 100 mg	8:00 am (Labeled to give with food)	Administered at 10:00 am without food
#1	Isosorbide 120 mg	8:00 am	Administered at 10:00 am
#1	Omeprazole 20 mg	8:00 am	Administered at 10:00 am
#1	Triam/HCTZ 37.5/25 mg	8:00 am	Administered at 10:00 am
#1	Furosemide 20 mg	8:00 am	Administered at 10:00 am
#1	Levothyroxine 100 mcg	8:00 am	Administered at 10:00 am
#1	DS 50 mg stool softener	8:00 am	Administered at 10:00 am
#1	Glucos/Chondr 1 tablet	8:00 am	Administered at 10:00 am
#1	Vitamin D 1000 units	8:00 am	Administered at 10:00 am
#1	Vitamin B 12	8:00 am	Administered at 10:00 am
#1	Ferrous Sulfate 325 mg	8:00 am	Administered at 10:00 am
#1	Vitamin B 6	8:00 am	Administered at 10:00 am

- Regulatory Insufficiency: When medications are administered traditionally by the program: The administration of medications shall be provided by a registered nurse, licensed practical nurse or advanced nurse practitioner registered in Iowa or by unlicensed assistive personnel in accordance with requirements in 655- Chapter 6 governing nurse delegation. (IAC r. 481-67.5(6a))

Dated this 5th day of November, 2010.