IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

December 7, 2010

Ms. Rachel Benda, Executive Director
The Kensington
2210 Avenue H
Fort Madison, IA 52627

RE: Final Recertification Monitoring Evaluation Report – The Kensington, Fort Madison, IA

Dear Ms. Benda:

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) and your Request for Reconsideration (R4R) 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 Insufficiencies, DIA accepts your POC and R4R.

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 **S0092** with effective dates of **August 15, 2010** through **August 14, 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:

Rachel Benda, Executive Director
The Kensington
2210 Ave H
Ft. Madison, IA 52627

Date of Monitoring Visit:

October 26, 2010

Monitor(s):

Stephanie Cummins, MA
Lori Miner, RN BSN

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 Kensington on October 26, 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:	55
Current number of tenants with cognitive disorder:	4
Total Population of GPP:	59

Dementia Specific Program (DSP)* – A program that is dementia specific and provides specialized care in a dedicated setting.

Total Population of DSP:	26
Total Census of ALP:	85

***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 20 tenants. Tenants generally thought the program was a good place to live. Apartments and common areas were kept clean and sanitary. Housekeeping was provided once per week to apartments. Staff responded to calls for assistance within five minutes. Nurses were available when needed. Care received was described as very good. Tenants were treated well and the staff were kind. The food was good; however, the temperature of hot foods needed improvement. A variety and choice of foods were offered. One tenant wanted to see a person at the front desk at all times on the weekends. One tenant verbalized concern over pets in the building. One tenant thought the water was not hot enough on the upper floors. Generally, the tenants felt safe and were satisfied with the program. Tenants would recommend the program to others.

Program History – The program did not receive any Regulatory Insufficiencies during this certification period.

On-Site Monitoring Evaluation – The monitor(s) made the observations detailed in the following areas. There were no Regulatory Insufficiencies found during this monitoring evaluation.

Dated this 6th day of December, 2010.