IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

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RODNEY A. ROBERTS, DIRECTOR

March 29, 2011

Ms. Pamela Wilson, Manager
Good Samaritan Society - Timber Ridge
#2 Oak Ridge Road
Ottumwa, IA 52501

RE: Final Initial Certification Monitoring Evaluation Report, Good Samaritan Society - Timber Ridge, Ottumwa, IA

Dear Ms. Wilson:

Enclosed is the **Final Initial Certification 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. Based upon a complete review of the Report and your actions to correct the identified Regulatory Insufficiencies, DIA accepts your POC and certification of Good Samaritan Society - Timber Ridge will continue.

Enclosed you will find the Assisted Living Program Certificate **S0310** with effective dates of **March 17, 2010** through **March 16, 2012**. This certificate is to be posted in the building for public viewing.

If you have any questions regarding this certification, please contact me at 515/281-4116.

Sincerely,

Jim Berkley

Jim Berkley
Program Coordinator
Adult Services Bureau

Enclosure

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

Assisted Living Program:

Pamela Wilson, Manager
Good Samaritan Timber Ridge Assisted Living
Two Oak Ridge Road
Ottumwa, IA 52501

Date of Monitoring Visit:

March 2, 2011

Monitor(s):

Hal L. Chase, RN BSN MPH

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 an Initial Certification 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 Good Samaritan Timber Ridge Assisted Living on March 2, 2011. 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:	8
Current number of tenants with cognitive disorder:	2
Total Population:	10

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 seven tenants. Tenants reported they liked living at the program and the buildings and grounds were well maintained. Housekeeping services were completed to their satisfaction. Staff provided good care and tenants reported they received the services they needed. Staff were well trained, responded within five minutes of being called and the program nurse was available when needed. Tenants reported they felt safe living at the program and made their own decisions related to personal and health related cares. There were enough activities offered by the program and tenants offered no additional suggestions for activities. Tenants reported they liked the food offered, received a variety of fruits and vegetables and voiced no complaints. Tenants reported they would recommend the program to their friends or to anyone who visited the program.

Program History – There were no regulatory insufficiencies during this certification period.

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

A. Evaluation of Tenant

Monitoring Observation: Three tenant files were reviewed. Tenant #2, a 94 year old, was admitted on 3-28-10 and had diagnoses of: Parkinson's Disease, Prostate Cancer, Hypertension, Anemia, History of Urinary Tract Infection and Depression. Progress notes of 2-4-11 revealed an in-dwelling urinary catheter was placed due to a restriction and inability to void urine. The tenant requested stand by assistance with transfer due to exacerbation of his/her Parkinson's Disease. Functional and cognitive evaluations were completed on 2-4-11, but a health evaluation was not completed.

Tenant #3, a 90 year old, was admitted on 12-18-10 and had diagnoses of: Diabetes Mellitus and a History of Bilateral Hip Fractures. Functional, cognitive evaluations were completed on 12-16-10 and 1-17-11, but a health evaluation was not completed prior to or within 30 days of admission.

- Regulatory Insufficiency: A program shall evaluate each prospective tenant's functional, cognitive and health status prior to the tenant's signing the occupancy agreement and taking occupancy of a dwelling unit in order to determine the tenant's eligibility for the program, including whether the services needed are available. The cognitive evaluation shall utilize a scored, objective tool. When the score from the cognitive evaluation indicates moderate cognitive decline and risk, the Global Deterioration Scale shall be used at all subsequent intervals, if applicable. If the tenant subsequently returns to the tenant's mildly cognitively impaired state, the program may discontinue the GDS and revert to a scored cognitive screening tool. The evaluation shall be conducted by a health care professional or human service professional. (IAC r.481-69.22(1))

- Regulatory Insufficiency: A program shall evaluate each tenant's functional, cognitive and health status within 30 days of occupancy. A program shall also evaluate each tenant's functional, cognitive and health status as needed with significant change, but not less than annually, to determine the tenant's continued eligibility for the program and to determine any changes to services needed. The evaluation shall be conducted by a health care professional or human service professional. A licensed practical nurse may complete the evaluation via nurse delegation when the tenant has not exhibited a significant change. (IAC r.481-69.22 (2))

B. Service Plan

Monitoring Observation: Tenant #2's service plan was updated on 2-4-11, but was not supported by a health evaluation. Tenant #3's service plan was updated on 1-17-11, but was not supported by a health evaluation.

- Regulatory Insufficiency: A service plan shall be developed for each tenant based on the evaluations conducted in accordance with subrules 69.22(1) and 69.22(2) and shall be designed to meet the specific service needs of the individual tenant. The service plan shall subsequently be updated at least annually and whenever changes are needed. (IAC r.481-69.26(1))

C. Staffing

Monitoring Observation: Four staff files were reviewed. Personnel files of Staff #1, #3, #4 and #5, revealed each had not demonstrated their competency to provide cares related to basic activities of daily living (ADLs). A review of Tenant #1, #2 and #3's file indicated each needed assistance with basic ADLs.

- Regulatory Insufficiency: A sufficient number of trained staff shall be available at all times to fully meet tenants' identified needs. (IAC r.481-67.9)1))

D. Food Service

Monitoring Observation: Personnel files of Staff #1, #3, #4 and #5, revealed each had not received annual in-service training on food protection.

- 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 29th day of March, 2011.