IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

DEAN A. LERNER, DIRECTOR

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

October 26, 2011

Ms. Kari Wittmeyer, Director
Ellen Kennedy Living Center
1177 7th Street SW
Dyersville, IA 52040

RE: Final Recertification Monitoring Evaluation Report – Ellen Kennedy Living Center, Dyersville, IA

Dear Ms. Wittmeyer:

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. **No Regulatory Insufficiencies were found during this evaluation.**

The review of the recertification documents you submitted has been completed and 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 **S0155** with effective dates of **September 27, 2010** through **September 26, 2012.**

If you have any questions regarding this certification, please contact me at 515/281-5721.

Sincerely,

Tamara Halvorson

Tamara Halvorson
ASB Certification Coordinator
Adult Services Bureau

Enclosure

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

Assisted Living Program:

Kari Wittmeyer, Director
Ellen Kennedy Living Center
1177 7th Street SW
Dyersville, IA 52040

Date of Monitoring Visit:

October 19, 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 Ellen Kennedy Living Center on October 19, 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:	27
Current number of tenants with cognitive disorder:	3
Total Population:	30

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 14 tenants was held. The tenants did not have any concerns with housekeeping, laundry or maintenance. They reported maintenance issues were addressed quickly. Their apartments were cleaned appropriately on a weekly or bi-weekly basis and a deep cleaning was completed once per year. Staff responded quickly when call and estimated staff responded within two minutes. The tenants received all the services they requested. The tenants described staff as great and wonderful. The administrative staff were approachable and the tenants could go to them with any concerns. The tenants enjoyed the food and reported there was a sufficient amount of food served. They requested less green beans and indicated the temperature of the food at the evening meal needed improvement. The quality of the food was appropriate and the meat was good. There were sufficient activities offered including Bingo, card games and outings. There was a workshop available to work on projects or crafts. The tenants received a schedule of activities. The tenants made their own decisions and did not have any concerns regarding autonomy. They were satisfied living at the program and would recommend it to others. They enjoyed not having to cook and one tenant indicated he/she loved it there and it was like home.

Program History – The program received no 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 onsite recertification monitoring evaluation.

Dated this 26th day of October, 2010.