IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

June 2, 2011

Rod Buch, Administrator
Lakeview Village
3012 F Drive
Amana, IA 52203

RE: Final Recertification Monitoring Evaluation Report – Lakeview Village, Amana, IA

Dear Mr. Buch:

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 **S0103** with effective dates of **January 17, 2011** through **January 16, 2013**.

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:

Rod Buch, Administrator
Lakeview Village
3012 F Drive
Amana, IA 52203

Date of Monitoring Visit:

March 24, 2011

Monitor(s):

Stephanie Cummins, MA
Margaret Kaltefleiter, RN MS

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 Lakeview Village on March 24, 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:	24
Current number of tenants with cognitive disorder:	3
Total Population:	27

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 19 tenants and one family member. They stated it was very nice place with great staff. The housekeeping services were excellent and the building looked very nice. The tenants stated staff made their beds and maintenance was very good. Nursing services were available; staff responded right away when called. The tenants stated they received the services they expected. Visitors were always made to feel very welcome. Tenants stated the staff were excellent, the best ever, and very accommodating. Staff were trained to meet their needs. Activities were very good, in fact they were awesome. Tenants enjoyed shopping, music and games. There was a variety of meats, vegetables and desserts but often the vegetables were served cold. Tenants stated that servings were sometimes too large, especially at the supper meal. Meat was generally overdone. One tenant stated they did not feel enough concern was given for diabetic diets. Another stated that too much pepper was used in cooking, as well as raw onions. Chocolate pie had not been served for about a year. They felt safe at the program, verbalized that they had lots of choices and made their own decisions. They were overall satisfied with the program and would recommend it to other elders. One tenant stated that living there "seems like heaven."

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.

A. Evaluation of Tenant

Monitoring Observation: Five tenant files were reviewed.

Tenant #1, a 95 year old, was admitted on 7-10-03 and diagnoses include: Dementia, Depression, Gastro Esophageal Reflux Disease (GERD), Hypertension (HTN), Myocardial Infarction (MI) and Hiatal Hernia. The tenant was staged at a four on the Global Deterioration Scale (GDS), which indicated moderate cognitive decline. The last cognitive evaluation was dated 2-16-10. A cognitive evaluation was not completed at least annually.

Tenant #2, a 79 year old, was admitted on 1-4-07 and diagnoses include: HTN, Type II Diabetes Mellitus (DM), Degenerative Joint Disease (DJD), Depression and Dementia. The last cognitive evaluation was dated 1-4-07. A cognitive evaluation was not completed as least annually.

- Regulatory Insufficiency: A program shall evaluate each tenant's functional, cognitive and health 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))

Dated this 13th day of March, 2011.