IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

June 3, 2011

Ms. Jonda Petty, Manager
Terrace Park Senior Living
201 SW Lorraine
Leon, IA 50144

RE: Final Recertification Monitoring Evaluation Report – Terrace Park Senior Living, Leon, IA

Dear Ms. Petty:

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 Insufficiencies, 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 **S0109** with effective dates of **February 5, 2011** through **February 4, 2013**.

If you have any questions in regard to 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 Recertification Monitoring Evaluation Report

Assisted Living Program:

Jonda Petty, Manager
Terrace Park Assisted Living
201 SW Lorraine
Leon, IA 50144

Date of Monitoring Visit:

April 12, 2011

Monitor(s):

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 Terrace Park Assisted Living on April 12, 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:	13
Current number of tenants with cognitive disorder:	1
Total Population:	14

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 meeting was held with 12 tenants. It was reported that the best thing about the program was the people; it feels like family. Housekeeping was completed to the satisfaction of tenants. Apartments and common areas were kept clean and neat. Maintenance responded quickly to needs of the tenants. Sidewalks were kept cleared during the winter months. The staff was described as good, treating the tenants with kindness and respect. The staff responded quickly if needed and the tenants indicated the staff seemed to know what to do to help them. The tenants said the food was good with a variety of meats, fruits, and vegetables offered. There were enough activities offered and no problems were encountered in attending programs at the attached care center. The tenants felt safe and were generally satisfied with the program. Tenants would recommend the program to others.

Program History – There were no substantiated regulatory insufficiencies found 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: Tenant #1, a 76 year-old, was admitted to the program on 2-8-11 with diagnoses of: Major Depression, Anxiety, Gastroesophageal Reflux Disease (GERD), and Hypertension (HTN). The tenant was scored at three on the Global Deterioration Scale (GDS) which indicated mild cognitive decline. Immediately prior to admission, Tenant #1 was hospitalized. A nutritional assessment dated 2-6-11 indicated an initial assessment was completed by a registered nurse (RN) while the tenant was hospitalized. The RN was not the program RN. The initial cognitive assessment, dated 2-6-11 by the hospital RN was noted by the program RN on 2-8-11. The initial functional and health assessment with a fax date of 2-7-11 was noted by the program RN on 2-8-11. The initial evaluation of health and the cognitive GDS tool was also dated 3-8-11 and signed by the program RN with a notation of no change noted. There was not a notation on the initial functional assessment to indicate a review at 30 days. The 30-day evaluation did not include a functional assessment.

Tenant #2, a 95 year-old, was admitted to the program on 10-30-10 with diagnoses of: Diabetes Mellitus, Foot Abscess, HTN, and High Cholesterol. The tenant was admitted to the hospital on 1-10-11 for care of the foot abscess and returned to the program on 2-10-11. Health and cognitive evaluations were completed on 2-9-11, prior to return to the program, and on 3-9-11, within 30 days of return to the program. A functional assessment was not completed with change in condition. The functional assessment was not completed on 2-9-11 or 3-9-11.

- 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: Immediately prior to admission, Tenant #1 was hospitalized for being suicidal. The service plan did not address the mental health needs of the tenant.

Tenant #3, an 84 year-old, was admitted to the program on 10-4-07 with a diagnosis of: Anoxic Brain Syndrome. The tenant was scored at four on the GDS, dated 10-12-10, which indicated moderate cognitive decline. The 90-day review dated 2-22-11 indicated the tenant was getting more forgetful and always looking for a small task to do. The service plan, dated 10-12-10, does not indicate the tenant's preferences for activities.

- Regulatory Insufficiency: The service plan shall be individualized and shall indicate, at a minimum: The tenant's identified needs and preferences for assistance; and for tenants who are unable to plan their own activities, including tenants with dementia,

planned and spontaneous activities based on the tenant's abilities and personal interests; and (IAC r. 481-69.26(4)(a)(d))

Dated this 5th day of May, 2011.