IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

RODNEY A. ROBERTS, DIRECTOR

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

June 3, 2011

James Hunter, Executive Director
Silvercrest Legacy Pointe
1020 S. Scott Boulevard
Iowa City, IA 52240

RE: Final Recertification Monitoring Evaluation Report – Silvercrest Legacy Pointe, Iowa City, IA

Dear Mr. Hunter:

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 **S0116** with effective dates of **May 9, 2011** through **May 8, 2013**.

If you have any questions regarding 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:

James Hunter, Executive Director
Silvercrest Legacy Pointe
1020 S. Scott Boulevard
Iowa City, IA 52240

Date of Monitoring Visit:

May 26, 2011

Monitor(s):

Stephanie Cummins, MA
Margaret Kaltefleiter, RN MS
Joyce Kix, RN

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 Silvercrest Legacy Pointe on May 26, 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:	63
Current number of tenants with cognitive disorder:	3
Total Population:	66

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 12 tenants. The tenants enjoyed living at the program, stated it was great, not home, but nice. Housekeeping services were completed as expected and the grounds were beautiful. Clothing items were sometimes missed after being laundered. Maintenance concerns were responded to promptly. Nursing services were available and staff responded to call lights within five minutes or less. Tenants stated staff was fantastic, very courteous and friendly. Staff was trained appropriately and knew what services to provide. There was a variety of meats, vegetables and desserts served. Hot foods were served hot, but salads were placed on the tables too early. Recently, a Jello salad had melted to the point where it was a bowl of liquid and a cold spaghetti salad was not eaten due to it being too bland. Sometimes meat was served tough and some foods were too spicy. The tenants wanted good food every day. The tenant's favorite activity was Bingo. It was suggested that a display of handiwork be offered as well as a knitting class. They felt safe, made their own decisions, and would recommend the program to others. Suggestions for improvement were to offer recycling for the daily newspapers, have the preacher talk into a microphone so those with hearing deficits would hear him, place light over the mailboxes, and notify the tenants when a new tenant moved into the community.

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 onsite recertification monitoring evaluation**.

Dated this 2nd day of June, 2011.