IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

Incident Intake #: 33839-I

July 5, 2011

Dawn Larkin, Administrator
Prairie Hills of Des Moines
2680 East Payton Avenue
Des Moines, IA 50320

RE: Final Incident Investigation Report – Prairie Hills of Des Moines, Des Moines, IA

Dear Ms. Larkin:

Enclosed is the **Final Incident Investigation Report** from the on-site monitoring visit of May 16 and 18, 2011, 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 identified.**

If you have any questions regarding the enclosed Report, 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 Incident Investigation Report

Assisted Living Program:

Dawn Larkin, Administrator
Prairie Hills at Des Moines
2680 East Payton Avenue
Des Moines, IA 50320

Incident Intake #:

33839-I

Date of Incident Investigation:

May 16 and 18, 2011

Monitor(s):

Joyce Kix, RN

Definitions:

The following definitions are relevant:

Regulatory Insufficiency - A violation of a statutory or rule provision within the Code of Iowa (2011) or the 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. [481 IAC 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 Incident Investigation 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 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 (GDS), or serves 55 or more tenants and 10 percent or more of the tenants have dementia between Stages 4 and 7 on the GDS, or holds itself out as providing specialized care for persons with dementia, such as Alzheimer's disease, in a dedicated setting.

Overview:

An incident investigation was conducted at Prairie Hills of Des Moines on May 16 and 18, 2011. In preparing this report, the following information was considered:

Assisted Living Programs are defined by the type of population served. **Note**: The census numbers were provided by the Program at the time of the on-site.

Dementia-Specific Program by Definition (DSP) – A Program that is Dementia-Specific by Definition but may have tenants without cognitive disorder.

Number of tenants in a DSP that serves fewer than 55 tenants and has five (5) or more tenants who have dementia between Stages 4 and 7 on the Global Deterioration Scale (GDS):	5
Number of tenants without cognitive disorder:	20
Total Population of Program at time of on-site	25

Dementia-Specific Program by Dedication – A Program that is Dementia-Specific, but may have tenants without cognitive disorder receiving special care in a dedicated setting.

Number of tenants without cognitive disorder:	1
Number of tenants with cognitive disorder:	2
Number of tenants receiving specialized care in a dedicated setting:	3
Total Population of Program at time of on-site	28

Accreditation Status – Not applicable

Program History – [Description of Program History]

Incident Investigation – The investigator made the observations detailed in the following areas:

A. Other

Incident Allegation: The program reported identification of money missing from a tenant. The losses occurred in January and March 2011.

- Monitoring Observation: During interview, the administrator stated the program had reported to the department five other losses of money discovered since December 2010. The program staff consisted of 16 certified nurse aides, three of whom had terminated employment. All staff have access to the key to tenant's rooms while they are working. A time table could not be determined for exactly when the thefts occurred. The program has initiated surveillance equipment.

- Regulatory Insufficiency: None noted.

Dated this 23rd day of May 2011.