IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

July 11, 2011

Ms. Jeane Arnette, Manager
Valley View Manor
2423 Lutheran Drive
Muscatine, IA 52761

RE: Final Recertification Monitoring Evaluation Report – Valley View Manor, Muscatine, IA

Dear Ms. Arnette:

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 **S0121** with effective dates of **August 8, 2011** through **August 7, 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:

Jeane Arnette, Assisted Living Manager
Valley View Manor
2423 Lutheran Drive
Muscatine, IA 52761

Date of Monitoring Visit:

June 20, 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 Valley View Manor on June 20, 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:	14
Current number of tenants with cognitive disorder:	0
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 community meeting was held with 12 tenants. The tenants stated it was fine living there, better than other places and had a friendly environment. Housekeeping services were absolutely completed to their satisfaction and maintenance requested was promptly provided. Tenants offered no suggestions for improvements regarding housekeeping or maintenance. Nursing services were available and staff responded immediately when called for assistance. Staff was friendly and treated the tenants well, provided services as expected and was trained appropriately. The food was good, more was available if requested and a good variety of choices was offered. Spaghetti was requested and no other suggestions regarding food were offered. Plenty of activities were offered which kept the tenants very busy. Tenants enjoyed playing Bingo, going on trips and shopping. It was suggested that it would be nice to have an Activity Director. Tenants felt safe, and in fact did not lock their apartment doors. Tenants made their own decisions, were satisfied with the program and would recommend it to others. No suggestions for improvements were voiced.

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. Service Plan

Monitoring Observation: Four tenant files were reviewed.

Tenant #1, a 70 year old, was admitted on 2-9-11 and diagnoses include: Chronic Airway Obstruction, Hypertension (HTN), Esophageal Reflux, Muscle Weakness and Mild Hyperlipidemia. The service plan was completed on 5-17-11 and cognitive and health evaluations were completed on 5-18-11. The service plan was not based on the cognitive and health evaluations.

Tenant #2, a 68 year old, was admitted on 5-10-11 and diagnoses include: Diabetes Mellitus, Atrial Fibrillation, HTN, Anemia, Congestive Heart Failure, Chronic Airway Obstruction and Peripheral Vascular Disease. The service plan was developed on 5-9-11 and the health evaluation was completed on 5-10-11. The service plan was not based on the health evaluation.

- Regulatory Insufficiency: A service plan shall be developed for each tenant based on the evaluations conducted in accordance with subrules 69.22(1) and 69.22(2) and shall be designed to meet the specific service needs of the individual tenant. The service plan shall subsequently be updated at least annually and whenever changes are needed. (IAC r. 481-69.26(1))

Dated this 8th day of July, 2011.