IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

July 29, 2011

Mr. Cliff Hagman, Executive Director
Homestead Assisted Living
2501 West State Street
Mason City, IA 50401

RE: Final Recertification Monitoring Evaluation Report – Homestead Assisted Living, Mason City, IA

Dear Mr. Hagman:

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 **S0045** with effective dates of **May 27, 2011** through **May 26, 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:

Cliff Hagman, Executive Director
Homestead Assisted Living
2501 West State St.
Mason City, Iowa 50401

Date of Monitoring Visit:

June 6, 2011

Monitor(s):

Maribeth Freland 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 Homestead Assisted Living on 6-6-11. In preparing this report, the following information was considered:

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:	21
Current number of tenants with cognitive disorder:	1
Total Population:	22

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 21 tenants in attendance. The tenants reported general satisfaction with the program. They reported respectful staff interaction and timely response to calls made using emergency pendants. The tenants reported the food served by the program was palatable and the provision of scheduled activities plentiful. They reported the program's environment to be clean and safe, acknowledging they would recommend the program to others.

Program History – The program had no regulatory insufficiencies this certification period.

On-Site Monitoring Evaluation – The monitor(s) made the observations detailed in the following areas.

Other- Dependent Adult Abuse Training

- Monitoring Observation: Staff #1, a licensed practical nurse (LPN), had a hire date of 11-23-10 and continued to work with tenants at the time of the monitoring visit. The personnel record included documentation of completion of a one hour internal electronic in-service related to the prevention, recognition and reporting of dependent adult abuse on 12-24-10; however, the curriculum used in the electronic training system had never been verified as adequate and approved by the state's abuse education review panel.

  Staff #2, a certified nurse aide (CNA), had a hire date of 8-2-10 and continued to work with tenants at the time of the monitoring visit. The personnel record included documentation of completion of a one hour internal electronic in-service related to the prevention, recognition and reporting of dependent adult abuse on 8-5-10; however, the curriculum used in the electronic training system had never been verified as adequate and approved by the state's abuse education review panel.

  Staff #3, a universal worker, had a hire date of 5-13-02 and continued to work with tenants at the time of the monitoring visit. The personnel record included documentation of completion of the required and approved dependent adult abuse mandatory reporter training on 7-24-03. The personnel record also included documentation of completion of two and a half hours of internal electronic in-services

related to the prevention, recognition and reporting of dependent adult abuse in 2009 and 2010; however' the curriculum used in the electronic training system had never been verified as adequate and approved by the state's abuse education review panel.

Staff #4, a universal worker, had a hire date of 7-25-07 and continued to work with tenants at the time of the monitoring visit. The personnel record lacked documentation of completion of the required and approved dependent adult abuse mandatory reporter training. The personnel record included documentation of completion of two and a half hours of internal electronic in-services related to the prevention, recognition and reporting of dependent adult abuse in 2009 and 2010; however, the curriculum used in the electronic training system had never been verified as adequate and approved by the state's abuse education review panel.

The program failed to assure multiple staff received at least two hours of dependent adult abuse reporter training that had been approved by the state's abuse education review panel within six months of employment with the program and at least every five years thereafter.

- Regulatory Insufficiency: A person required to report cases of dependent adult abuse pursuant to section 235B.3, other than a physician whose professional practice does not regularly involve providing primary health care to adults, shall complete two hours of training related to the identification and reporting of dependent adult abuse within six months of initial employment or self-employment which involves the examination, attending, counseling, or treatment of adults on a regular basis. Within one month of initial employment or self-employment, the person shall obtain a statement of the abuse reporting requirements from the person's employer or, if self-employed, from the department. The person shall complete at least two hours of additional dependent adult abuse identification and reporting training every five years. (IAC 235B.16.5.b)

- Regulatory Insufficiency: The person may complete the initial or additional training requirements as a part of any of the following that are applicable to the person: (1) a continuing education program required under chapter 272C and approved by the licensing board. (2) A training program using a curriculum approved by the abuse education review panel established by the director of public health pursuant to section 135.11. or (3) A training program using such an approved curriculum offered by the department of human services, the department of elder affairs, the department of inspections and appeals, the Iowa law enforcement academy or a similar public agency. (IAC 235B.16.5.d.(1)(2) (3))

Dated this 28th day of July, 2011.