IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

August 29, 2011

Ms. Lisa Van Klavern, Manager
Cherry Ridge Independent and Assisted Living
217 Highway 30 West
Mt. Vernon, IA 52314

RE: Final Recertification Monitoring Evaluation Report – Cherry Ridge Independent and Assisted Living, Mt. Vernon, IA

Dear Ms. Van Klavern:

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 **S0124** with effective dates of **September 18, 2011** through **September 17, 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:

Lisa Van Klavern, Assisted Living Manager
Cherry Ridge Assisted Living
217 Highway 30 West
Mt. Vernon, IA 52314

Date of Monitoring Visit:

July 13, 2011

Monitor(s):

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 Cherry Ridge Assisted Living on July 13, 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:	10
Current number of tenants with cognitive disorder:	0
Total Population:	10

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 three tenants. The tenants enjoyed the convenience of living there and stated people were very friendly. Housekeeping services were completed appropriately and the buildings and grounds were safe, clean and sanitary. The tenants stated nursing services were available and staff responded within five minutes or less when assistance was requested. They stated staff was trained very well to provide all services needed and called everyone by name. The tenants stated living there was not like home but it was like living with one big happy family. The tenants liked the food and reported there was a good variety of food served. The temperature of the food was appropriate. They did not offer any suggestions for improvement regarding the food. There were enough activities offered. They enjoyed playing Bingo, watching movies and going out to eat. The tenants recently went on a pontoon ride and enjoyed it so much; they hoped they would be able go again. They felt safe and made their own decisions. They stated staff were doing a great job and they were glad to have this program available to them. The tenants were generally satisfied and would recommend the program to others.

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 14th day of July, 2011.