

INSPECTIONS & APPEALS

TERRY E. BRANSTAD
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RODNEY A. ROBERTS, DIRECTOR

October 5, 2011

Ms. Dawn Larkin, Administrator
Prairie Hills at Des Moines
5815 SE 27th Street
Des Moines, IA 50320

RE: Final Recertification Monitoring Evaluation Report – Prairie Hills at Des Moines, Des Moines, IA

Dear Ms. Larkin:

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 **S0299** with effective dates of **October 15, 2011 through October 14, 2013**.

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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:

Dawn Larkin, Administrator
Prairie Hills at Des Moines
5815 S.E. 27th Street
Des Moines, IA 50320

Date of Monitoring Visit:

September 14, 2011

Monitor(s):

Hal L. Chase, RN BSN MPH

Definitions: *The following definitions are relevant:*

Assisted Living Program – A program certified under 481 IAC 69 that provides housing with contracted services to three or more tenants in a physical structure that provides a homelike environment. Services may include but are not limited to health-related care, personal care, and assistance with instrumental activities of daily living. A General Population Program is an Assisted Living Program that is not dementia-specific but may have tenants with cognitive disorder.

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.

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 statutory or rule violations. The plan should identify how and by what date each regulatory insufficiency will be corrected, and what measures will be taken to ensure the problem does not recur. The plan is due to DIA within ten (10) working days of the program's receipt of a Complaint/Incident Investigation Report. Depending on the circumstances, DIA may revisit the assisted living program to confirm progress in fulfilling a plan's corrective measures.

Overview:

An on-site monitoring evaluation was conducted at Prairie Hills at Des Moines on September 14, 2011. In preparing this report, the following information was considered:

Current Program Census

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

General Population Program

Number of tenants without cognitive disorder:	25
Number of tenants with cognitive disorder:	4
Total Population of Program at time of on-site	29

Tenant/Family Satisfaction Results – A community meeting was held with 31 tenants. Tenants reported they like living at the program. Housekeeping services were satisfactory and the building and grounds were clean, safe and sanitary. Staff responded within 10 minutes of being called and staff and the Nurse treated them with respect and dignity. Tenants received the services requested and tenants voiced no other concerns. The food was good and a variety of meats, vegetables and desserts was offered. Enough activities were offered and the Program prepared weekly and monthly activity calendars. Tenants felt safe, made their own decisions, were satisfied with the services they received and recommended 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 observations detailed in the following areas.

A. Record Checks

Monitoring Observation: Five staff files were reviewed. Staff #5 was hired on 1-20-11. Criminal background and dependent adult abuse checks were completed on 1-13-11. A child abuse background check was requested at the same time, but documentation indicated the database was unavailable and it was requested the program try again later. The program did not complete a background check for child abuse.

- **Regulatory Insufficiency:** Prior to employment of a person in a facility, the facility shall request that the department of public safety perform a criminal history check and the department of human services perform child and dependent adult abuse record checks of the person in this state. A facility shall inform all persons prior to employment regarding the performance of the record checks and shall obtain, from the persons, a signed acknowledgment of the receipt of the information. (135C.33(1))

Dated this 26th day of September, 2011