IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

October 28, 2011

Ms. Debbie Klatt, Administrator
Otsego Place
520 Otsego Street
Storm Lake, IA 50588

RE: Final Recertification Monitoring Evaluation Report – Otsego Place, Storm Lake, IA

Dear Ms. Klatt:

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 **S0184** with effective dates of **December 4, 2011** through **December 3, 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:

Debbie Klatt, Administator
Otsego Place
520 Otsego St.
Storm Lake, Iowa 50588

Date of Monitoring Visit:

October 10, 2011

Monitor(s):

Maribeth Freland RN

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 Otsego Place on October 10, 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:	48
Number of tenants with cognitive disorder:	1
Total Population of Program at time of on-site	49
TOTAL census of Assisted Living Program	49

Tenant/Family Satisfaction Results – A community meeting was held with 24 tenants in attendance. The tenants reported general satisfaction with the program. They reported respectful staff member interaction and timely response to calls made using emergency pendants. The tenants reported the food served by the program was palatable, however expressed concerns related to food temperatures. The tenants also reported the provision of scheduled activities to be 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 made observations detailed in the following areas.

Food Service

- Monitoring Observation: Upon initiation of the monitoring visit, the Administrator reported all food was prepared in a local nursing home and transported to the assisted living to be served to tenants by the program staff members. During the group tenant meeting with the monitor, multiple tenants reported all food was transported from a local nursing home with the exception of the following: fresh eggs were cooked to order daily by program staff members in the program's kitchen; toast and English muffins were prepared onsite daily by program staff members; and grilled sandwiches such as grilled cheese, grilled ham/turkey and cheese and Reuben sandwiches were prepared onsite when served by program staff members. Later, the Administrator concurred the above stated items were cooked or prepared in the program's kitchen by program staff members.

  The program's five week menu cycle indicated the program served eggs cooked to order five to seven days weekly, toast or English muffins five to seven days weekly and toasted sandwiches once weekly.

The program's kitchen were not licensed pursuant to the Iowa Code Chapter 137F, which considers the program kitchen to be a food establishment if it stores, prepares, packages, serves, vends or otherwise provides food for human consumption.

The 2005 Iowa Food Code requires all hot food items to maintain 140 degrees Fahrenheit or greater until served. If an item temperature cools below 140 degrees, the Food Code requires reheating to a minimum of 165 degrees Fahrenheit prior to serving.

The program's food temperature logs documented the following:

Food Type	*Dates below 140 degrees Fahrenheit- (ranges 112 degrees to 139 degrees)*
Bacon	May 29,30, 2011; June 3,5,6,7,8,9,11,12,14,16,17,18,20,21,22,24,25,26 and 30, 2011; July 1,2,10,13,14,1518,19,20,22,23,24,26,27 and 29, 2011; August 1,3,5,7,12,13,14,15,16,18,19,21,23,24,26,29,30 and 31, 2011; September 3,4,5,6,8,9,10,11,12,13,14,15,16,17,18,19,20,21,22,23,24,25 and 30, 2011; and October 5, 2011.
Sausage/ Sausage Gravy	June 6,9,16,20,25 and 27, 2011; July 14 and18, 2011; August 3,4,16,18,24 and 30, 2011; September 13,15 and 19, 2011; and October 7, 2011.
Vegetables	June 15,16,20,22 and 28, 2011; July 3,14,22,29 and 30, 2011; August 2, 2011; September 2 and 11, 2011; and October 3, 2011.
Waffles	June 22, 2011; July 5, 2011; August 3, 2011; September 13, 2011; and October 8, 2011.
Egg Omelets/ Breakfast Sandwiches	August 23, 2011; September 11 and 24, 2011; and October 3, 2011

The 2005 Iowa Food Code prohibits direct handling of food with bare hands.
On 10-10-11, during observation of the noon meal service, the monitor noted all food was prepared at a location other than the program and transported to the program for service. Staff #1, dietary aide, was portioning the Oreo dessert bars in the kitchen. Staff #1 scooped up each serving with a spatula, and then picked up each portion from the spatula with ungloved hands to place on individual plates. Staff #1 also did not have a hairnet on.

The program had a counter outside the kitchen area where lettuce salad with dressings and a fruit/whipped topping salad were placed for portioning. Staff #2, #3, #4 and #5 all assisted with portioning and serving the two salads placed on the counter outside of the kitchen. Staff #2, #3, #4 and #5 did not have hairnets on prior to beginning serving the two items.

- Regulatory Insufficiency: Programs engaged in the preparation and service of meals and snacks shall meet the standards of state and local health laws and ordinances pertaining to the preparation and service of food and shall be licensed pursuant to Iowa Code Chapter 137F. (IAC r. 481-69.28(6))

Dated this 27th day of October 2011.