

TERRY E. BRANSTAD
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LT. GOVERNOR

November 3, 2011

Ms. Amy Pagel, Executive Director
Traditions of West Union
609 Highway 150 North
West Union, IA 52175

RE: Final Recertification Monitoring Evaluation Report – Traditions of West Union, West Union, IA

Dear Ms. Pagel:

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 **S0265** with effective dates of **November 26, 2011** through **November 25, 2013**.

LUCAS STATE OFFICE BUILDING, 321 EAST 12TH STREET, DES MOINES, IOWA 50319-0083

ADMINISTRATION
(515) 281-5457
FAX: (515) 242-6863

ADMINISTRATIVE HEARINGS
(515) 281-6468
FAX: (515) 281-4477
Telephone Number for the Hearing Impaired: (515) 242-6515

HEALTH FACILITIES
(515) 281-4115
FAX: (515) 242-5022

INVESTIGATIONS
(515) 281-5714
FAX: (515) 242-6507

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:

Amy Page, Executive Director
Traditions of West Union
609 Highway 150 North
West Union, IA 52175

Date of Monitoring Visit:

September 26, 2011

Monitor(s):

Margaret Kaltefleiter, RN MS

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 Traditions of Iowa, LLC on September 26, 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:	28
Number of tenants with cognitive disorder:	3
Total Population of Program at time of on-site	31

Dementia-Specific Program by Dedication

Number of tenants without cognitive disorder:	1
Number of tenants with cognitive disorder:	9
Total Population of Program at time of on-site	10

TOTAL census of Assisted Living Program	41
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Tenant/Family Satisfaction Results – A community meeting was held with 16 tenants. They stated they liked living at the Program because it was a friendly place, the staff was great and they received three meals a day. Housekeeping services were provided to their satisfaction and the building and grounds were safe, clean and sanitary. Nursing services were available and staff responded immediately when tenants used their pendants to call for help. The care received was described as excellent, good and top of the line. The tenants stated staff treated them nicely, knew what services to provide and was well trained. They liked the food and received a good variety of meats, vegetables and desserts. Suggestions for improvements regarding the food included serving the food at a warmer temperature, use more imagination in seasonings and provide a quiet, relaxed environment. The tenants stated the room was very noisy because the doors to the kitchen made a slamming sound each time staff came through the doors. The tenants reported sometimes the Program ran out of food and the items listed on the menu were not available. Tenants stated they felt safe, were satisfied with the services, made their own decisions, 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 observations detailed in the following areas.

A. Dementia-Specific Education for Program Personnel

Monitoring Observation: Five staff files were reviewed. Staff #1 was hired on 4-29-11 as a Universal Worker (UW). Staff #2 was hired on 6-1-11 as a UW. Staff #3 was hired on 11-16-10 as a UW. Staff #4 was hired on 5-23-11 as a UW. Staff #5 was hired on 4-21-10 as a UW. Staff #1, #2, #3, #4 and #5 completed online dementia specific education but the training was not completed within 30 days of employment. Eight hours of dementia training was not completed within 30 days of employment.

Regulatory Insufficiency: All personnel employed by or contracting with a dementia-specific program shall receive a minimum of eight hours of dementia-specific education and training within 30 days of either employment or the beginning date of the contract, as applicable. (IAC r. 481-69.30(1))

Dated this 11th day of October, 2011.