IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

DEMAND LETTER
CERTIFIED

December 13, 2011

Sandy Helm, Administrator
Vintage Park Apartments
810 E. Van Buren
Lenox, IA 50851

RE: I. Amended Final Recertification Monitoring Evaluation Report
II. Civil Penalty
III. Sanctions – Conditional Operation
IV. Appeals/Hearings
V. Conclusion

Dear Ms. Helm:

I. Amended Final Recertification Monitoring Evaluation Report – Vintage Park Apartments, Lenox, IA

Enclosed is the **Amended 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) chapter 481—67 and 481—69. The enclosed report has been amended to include information from the State Fire Marshal's inspection of July 20, 2011. The Report notes the Regulatory Insufficiencies in the area(s) of: Record Checks and Life Safety. Vintage Park Apartments ("Program") is being assessed a $1500 civil penalty pursuant to Iowa Code section 231C.14 and 481 IAC 67.12(3)(a).

DIA is accepting the Plan of Correction (POC) submitted on 7/25/11 for the Regulatory Insufficiency in the area of Record Checks. An acceptable POC for the State Fire Marshal's inspection report has not, to date, been submitted to the State Fire Marshal's Office. Final review by DIA of the Life Safety Regulatory Insufficiency is dependent upon the submission of an acceptable POC within ten days to the State Fire Marshal's Office and DIA.

II. Civil Penalty

If, within thirty (30) days of the receipt of this demand letter, you do not request a formal hearing or withdraw your request for formal hearing, the assessed penalty will be reduced by thirty-five percent (35%) to nine hundred and seventy five dollars ($975) pursuant to IAC 67.12(3)d.
If you wish to pay the penalty, please submit that information in writing to the attention of **Jim Berkley** and remit the penalty assessed by check or money order in the amount of nine hundred and seventy five dollars ($975) within 30 business days after the receipt of this demand letter.

III. Sanctions – Conditional Operation

As reflected in the Amended Final Report, the Program failed to comprehensively follow the regulations in IAC chapters 481-67 and 481-69. Due to the Program's noncompliance, current Regulatory Insufficiencies, and the findings of the on-site monitoring visit of June 29, 2011 and the State Fire Marshal's inspection of July 20, 2011, the Program is being issued a Conditional Certificate **S0179.** Please see the attached Notice of Conditional Certificate for additional information.

IV. Appeals/Hearings

The Program may appeal the DIA decision in accordance with IAC rule 481—67.13 within 30 days of this notice, by submitting a request for appeal to DIA. A contested case hearing will be held pursuant to IAC chapter 481—10. If the Program appeals, the civil penalty will be suspended, pending the appeal process. If the Program does not appeal, the fine is due within 30 days of notice.

V. Conclusion

The POC submitted on July 25, 2011 has been reviewed and will constitute the final POC related to the Record Checks Regulatory Insufficiency cited following the on-site visit of June 29, 2011. An acceptable POC for the Life Safety Regulatory Insufficiency must be submitted to DIA within 10 working days. An acceptable POC must also be submitted to the State Fire Marshal's Office.

Due to the Program's noncompliance, explained in the enclosed Amended Final Report, the Program is being issued a Conditional Certificate (S0179). Please see the attached Notice of Conditional Certificate for additional information.

DIA may revisit the Program to confirm compliance in fulfilling the POC's corrective measures. If the Program wishes to appeal or request a hearing on the final findings, the program may do so within 30 days of this letter.

If you have any questions in regard to this letter and report, please contact your Program Coordinator, Jim Berkley, at 515/281-4116.

Sincerely,

Ann Martin

Ann Martin, Bureau Chief
Adult Services Bureau

Enclosure

Iowa Department of Inspections and Appeals
Assisted Living Program
Amended Final Recertification Monitoring Evaluation Report

Assisted Living Program:

Sandy Helm, Administrator
Vintage Park Apartments
810 E. Van Buren
Lenox, IA 50851

Date of Monitoring Visit:

June 29, 2011

Monitor(s):

Hal L. Chase, MPH BSN

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 Vintage Park Apartments on June 29, 2011. The State Fire Marshal's Office completed an inspection on July 20, 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:	25
Current number of tenants with cognitive disorder:	2
Total Population:	27

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 25 tenants in attendance. Tenants reported it was a nice place to live and housekeeping services were provided to their satisfaction. The building and grounds were clean, safe and sanitary. Staff responded promptly, less than ten minutes when they called for assistance and nursing services were available. Staff and the nurse treated them as they wanted to be treated. Tenants received the services requested and there were no concerns with staff. The food was good and a variety of meats, vegetables and desserts was offered. Hot foods were served hot and cold foods were served cold. Tenants did not offer any improvements for the food. There were enough activities 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 the observations detailed in the following areas.

A. Records Checks

Monitoring Observation: Four staff files were reviewed. Staff #1 was hired on 10-11-10. Criminal background and dependent adult abuse checks were completed on 10-7-10, but a child abuse check was not completed. Staff #2 was hired on 6-18-10. Criminal background and dependent adult abuse checks were completed on 6-17-10, but a child abuse check was not completed.

- 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))

B. Life Safety

Monitoring Observation: Concerns were noted during the onsite investigation by the State Fire Marshalls office completed 7/20/11. Concerns included but are not limited to the following: The State Fire Marshal performed an onsite investigation dated 7/21/09. The program submitted a plan of correction to that onsite investigation. The plan of correction dated 8/27/09 stated in #7 " Vintage Park is taking bids and looking for financing to complete the dry sprinkler repair. A plan will be developed by the company we hire and be submitted to the Iowa State Fire Marshal's office for review. The plan should be completed and repair started by Oct 30th. Vintage Park will keep Mr. Spears informed of our progress."

The program did not comply with or follow the plan of correction dated 8/27/09 as evidenced by the onsite observation of the State Fire Marshal investigators findings dated 7/20/11. The new finding was cited under the State Fire Marshal report #2 and stated "The facility shall repair the dry sprinkler system in the attic to operate properly in accordance with National Fire Protection Association (NFPA) Standard 13 and 25. Plans shall be developed and submitted to the Iowa State Fire Marshal's Office for review. At the time of this inspection the dry sprinkler system was shut down for repairs following a broken sprinkler pipe in the attic. Record review of the completed fire watch documentation showed the system went down on or around December 25, 2008. Interview with Doc Ryan of Ryan electric revealed he was in the process of replacing approximately 7,000 feet of pipe in the attic and was close to being finished. He indicated he was working with Iowa Fire Equipment and they were going to conduct the 200 pound test of the system following replacement of the pipe. Also, he reported he was not changing the size of pipe but was correcting the pitch of the pipe and changing the pipe connectors."

The State Fire Marshal also identified the following. "Observation and staff interview on 7/20/11 revealed the dry system was still shut down for repairs. Administrative Staff reported they discontinued the fire watch procedure after getting approval from the State Fire Marshal's Office in Des Moines. Administrative Staff also reported following the last inspection of the facility they applied for and received a grant to make the repairs but were unable to borrow the remaining funds to complete the repairs. She reported the facility is in the process of selling the building to free up enough funds to make necessary repairs."

- Regulatory Insufficiency: The program's structure and procedures and the facility in which a program is located shall meet the requirements adopted for assisted living programs in administrative rules promulgated by the state fire marshal. Approval of the state fire marshal indicating that the building is in compliance with these requirements is necessary for certification of a program. (IAC r. 481-69.32(3))

STATE OF IOWA

DEPARTMENT OF INSPECTIONS AND APPEALS

Des Moines, Iowa

IN THE MATTER OF:
Vintage Park Apartments
810 E. Van Buren
Lenox, IA. 50851

NOTICE OF CONDITIONAL CERTIFCATE
Assisted Living Program
Certificate #: S0179

YOU ARE NOTIFIED, THAT PURSUANT TO Iowa Code Section 231C.10(2), the Certificate for Vintage Park Apartments is placed on conditional status.

This action is based on Iowa Code Section 231C.10(2) which provides that the Department of Inspections and Appeals may, as an alternative to denial, suspension or revocation, issue a conditional certificate.

The Department may deny, suspend or revoke a certificate for any of the reasons set forth in Iowa Code Section 231C.10, including but not limited to:

Substantial or repeated failure on the part of the assisted living program to comply with the requirements of Chapter 231C and the minimum standards and rules issued pursuant thereto. Iowa Code Section 231C.10(1).

The particular violations which establish the basis for the issuance of the notice of conditional certificate are as follows:

1. **State Fire Marshall inspection dated 7/20/2011**
   a. Failure to repair dry sprinkler system in the attic to operate in accordance with National Fire Protection Association (NFPA) Standards 13 and 25. This Concern was first noted by the State Fire Marshal's Office in July 2009.
2. **Amended Final Recertification Monitoring Evaluation Report, issued 12/13/2011**
   a. Life Safety Regulatory Insufficiency
   b. Civil Penalty of $1500 issued

The Department has the authority to conditionally issue or continue a certificate d ependent upon the performance by the licensee of reasonable conditions within a reasonable period of time as set by the Department. This is to permit the licensee to continue the operation of the assisted living program pending full compliance with the statute or regulations. If the licensee does not make the diligent efforts to comply with the conditions prescribed, the department may, under the proceedings prescribed by law, suspend or revoke the certificate. No assisted living program shall be operated on a conditional certificate for more than one year.

The conditions include but are not limited to the following:

1. Complete all Dry Sprinkler system repair back to the National Fire Protection Association (NFPA) Standards 13 and 25.
2. All repairs to the Dry Sprinkler System shall be commenced no later than 90 calendar days after issuance of this Notice.
3. The program must disclose to all current tenants information about the Dry Sprinkler System not being operational and the program's failure to comply with NFPA Standards 13 and 25. The program shall submit to the Department evidence of this disclosure no later than 30 calendar days after issuance of this Notice.

You can request a hearing to contest this decision to issue a conditional license by writing to the Department of Inspections and Appeals, Health Facilities Division, Lucas Building, Des Moines, Iowa 50319, within 30 days of the issuance of this notice.

Dawn Fisk

Dawn Fisk, Administrator
Division of Health Facilities

12/13/11

Date