IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

April 9, 2012

Ms. Deb Kemper, RN Administrator
Linnwood Estates Assisted Living
700 North Linn
Glenwood, IA 51534

RE: Final Recertification Monitoring Evaluation Report – Linnwood Estates Assisted Living, Glenwood, IA

Dear Ms. Kemper:

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 **S0191** with effective dates of **May 26, 2012** through **May 25, 2014**.

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:

Deb Kemper, RN Administrator
Linnwood Estates Assisted Living
700 North Linn
Glenwood, IA 51534

Date of Monitoring Visit:

March 20, 2012

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: ***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:	23
Number of tenants with cognitive disorder:	2
Total Population of Program at time of on-site	25
TOTAL census of Assisted Living Program	25

Tenant/Family Satisfaction Results – A community meeting was held with 24 tenants in attendance. Tenants reported the Program was a nice place to live. Their apartments were cleaned to their satisfaction and the building and grounds were clean, safe and sanitary. Nursing staff were trained well, treated each of them with respect and dignity and responded quickly when called. The Program nurse, who was also the Administrator, was available when needed and responded to any of their concerns quickly. The food was described as good, with a variety of meats offered. An alternative to the main entrée was available when requested. There were enough activities offered and tenants reported monthly meetings were held where suggestions were taken. Tenants reported they would recommend to program to anyone.

Program History – There were no regulatory insufficiencies during this recertification period.

On-Site Monitoring Evaluation – The monitor(s) made observations detailed in the following areas.

A. Other

Monitoring Observation: Staff #1 was hired on 3-1-11, Staff #2 was hired on 12-6-11, Staff #3 was hired on 3-15-12, Staff #4 was hired on 5-6-11, Staff #5 was hired on 5-26-10 and Staff #6 was hired on 3-7-08. Personnel files for each of staff listed above was reviewed and indicated as part of their orientation to work at the program, each had received a one hour orientation on dependent adult abuse and watched a one-hour video. The training literature and video was not an approved curriculum and the information was taught by the Administrator who was not an approved provider.

The Administrator reported staff was given literature for dependent adult abuse and watched a one-hour video. The Administrator reported she was not aware an approved provider and curriculum for dependent adult abuse was required. The program did not provide appropriate training on dependent adult abuse to staff working with dependent adults.

Regulatory Insufficiency: a person required to report cases of dependent adult abuse pursuant to section 235 B.3, other than a physician who professional practice does not regularly involve providing primary health care to adults, shall complete two hours of training relating to the identification and reporting of dependent adult abuse within six months of initial employment or self-employment which involves the examination, attending, counseling, or treatment of adults on a regular basis. Within one month of initial employment or self-employment, the personal shall obtain a statement of the abuse reporting requirements from the person's employer or, if self-employed, from the department. The person shall complete at least two hours of additional dependent adult abuse identification and reporting training every five years. (IAC 235B.16.5 (b))