IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

May 17, 2012

Ms. Marva Davis, Director
Shores at Pleasant Hill
1500 Edgewater Drive
Pleasant Hill, IA 50327

RE: Final Recertification Monitoring Evaluation Report – Shores at Pleasant Hill, Pleasant Hill, IA

Dear Ms. Davis:

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 **S0239** with effective dates of **June 26, 2012** through **June 25, 2014**.

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:

Marva Davis, RN, Director of Health Services
Shores at Pleasant Hill
1500 Edgewater Drive
Pleasant Hill, IA 50327

Date of Monitoring Visit:

April 4, 2012

Monitor(s):

Maribeth Freland, RN
Joyce Kix, 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: ***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:	50
Number of tenants with cognitive disorder:	4
Total Population of Program at time of on-site	54
Dementia-Specific Program by Dedication	
Number of tenants without cognitive disorder:	5
Number of tenants with cognitive disorder:	12
Total Population of Program at time of on-site	17
TOTAL census of Assisted Living Program	71

Tenant/Family Satisfaction Results – A community meeting was held with 15 tenants. They reported the program was clean staff were prompt, kind, and well trained. Nursing services and activities were provided with no concerns. Several tenants reported concerns regarding dining services which reflected personal tastes. Concerns were mentioned regarding safety of outside grounds with sidewalks heaving. The tenants reported general satisfaction with the program and would recommend it to others.

Program History – The program had no regulatory insufficiencies during this certification period.

On-Site Monitoring Evaluation – The monitors made observations detailed in the following areas.

Structural requirements

Monitoring Observation: During a group meeting, several tenants reported sidewalks around the exterior of the building had heaved and were considered to be a potential safety risk. During a tour with the Maintenance Director and Marketing Director, the monitors observed four areas of safety concern that had not been marked with paint or cones to indicate a potential danger. The areas were as follows:

1. Sidewalk outside the kitchen area heaved with a one and one eighth inch height difference between two of the sidewalk panels.
2. Walkway sidewalk heading to the pond heaved with a 5/8 inch height difference between two of the sidewalk panels
3. Sidewalk in front of the memory care unit with a two by five inch area of concrete missing and a one and one eighth difference in height between two of the sidewalk panels

4. Wheelchair accessible ramp, allowing entry from the parking lot to the sidewalk, between the memory care unit entrance and the kitchen area showed a four inch wide by nine inch long area and ¾ inch deep hole of concrete missing.

Tenants frequently walked along these areas. The difference in the walking service areas placed the tenants at risk for falling and injury.

Regulatory Insufficiency: The building and grounds shall be well-maintained, clean, safe and sanitary. (481 r. 69.35 (1) b.)