IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

August 15, 2012

Ms. Jill Boss, Director & RN Manager
Maggie's House Assisted Living
107 E. 2nd Street
DeWitt, IA 52742

RE: Final Recertification Monitoring Evaluation Report – Maggie's House Assisted Living, DeWitt, IA

Dear Ms. Boss:

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 **S0089** with effective dates of **July 10, 2012** through **July 9, 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:

Jill Boss, Director & RN Manager
Maggie's House Assisted Living
107 E. 2nd Street
DeWitt, IA 52742

Date of Monitoring Visit:

July 9, 2012

Monitor(s):

Stephanie Cummins, MA
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: ***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:	20
Number of tenants with cognitive disorder:	1
Total Population of Program at time of on-site	21
TOTAL census of Assisted Living Program	21

Tenant/Family Satisfaction Results – A community meeting was held with 11 tenants. They liked living at the Program because they did not have to work, everyone cared for them and it was a good place. Housekeeping services were completed to their satisfaction and the buildings and grounds were safe, clean and sanitary. Nursing services were available and staff responded quickly when called. One tenant said he/she had accidently called for help and staff came running. The tenants received the services they expected when the occupancy agreement was signed. The tenants said staff treated them well and they described the care received as really good. The tenants said the food was good and not so good, just like when one cooked at home. They said most of the time they received a good variety of meats, vegetables and desserts. The hot foods were served hot and if not, the food could be sent back to be reheated and cold foods were served cold. One tenant said they were served a lot of sandwiches. The tenants said they were served too much fruit cocktail and the beef stew had hamburger meat in it instead of what they would traditionally expect in beef stew. Sometimes the chicken and beef was tough and the asparagus was overcooked making it too hard to chew. A request was made for more salads, such as lettuce salad and coleslaw. The tenants said the activity staff was good, went above and beyond what was expected and gave 110%. The tenants received an activity calendar and one tenant requested to go swimming and to have a bus available for other activities. The tenants said they enjoyed a recent trip to John Deere, having lunch and seeing all the antique equipment. The tenants felt safe at the Program, made their own decisions and would recommend it 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. Record Checks

Monitoring Observation: Five staff files were reviewed. Staff #1, a caregiver, was hired on 5-8-12. Background and abuse checks were completed on 4-30-12. The criminal history check revealed further research was required. The Iowa Record Check Request Form dated 5-7-12 indicated a record was found.

An evaluation was not completed by the Department of Human Services (DHS) to determine that the record did not warrant the employment prohibition. An employee was employed without an evaluation from DHS to determine if the record warranted the employment prohibition.

Regulatory Insufficiency: Pursuant to Iowa Code section 135C.33, a prospective employee of a program shall have a criminal history check, dependent adult abuse check, and child abuse check performed before the prospective employee begins work. If a prospective employee has a criminal history or an abuse history, the prospective employee shall not be employed by the program unless the department of human services has performed an evaluation and determined that the record does not warrant the employment prohibition. Proof of the preemployment background check shall be maintained the in the program's employee file. The program must meet all requirements of Iowa Code section 135C.33 and administrative rules adopted pursuant to Iowa Code section 135C.33. (IAC r. 481-67.9(3))