IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

HEALTH FACILITIES DIVISION
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RODNEY A. ROBERTS, DIRECTOR

December 28. 2012

Ms. Cheri Leachman, Director
Turner Pointe Assisted Living
1203 Buell Avenue
McGregor, IA 52157

RE: Final Recertification Monitoring Evaluation Report – Turner Pointe Assisted Living, McGregor, IA

Dear Ms. Leachman:

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. DIA has denied your Request for Reconsideration as it did not meet the criteria as interpreted by the Department to serve food out of an unlicensed kitchen. 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 **S0246** with effective dates of **December 6, 2012** through **December 5, 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:

Cheri Leachman, Director
Turner Pointe Assisted Living
1203 Buell Avenue
McGregor, IA 52157

Date of Monitoring Visit:

October 30, 2012

Monitor(s):

Stephanie Cummins, MA

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:	4
Number of tenants with cognitive disorder:	0
Total Population of Program at time of on-site	4
TOTAL census of Assisted Living Program	4

Tenant/Family Satisfaction Results – A community meeting with three tenants was held. Housekeeping services were provided to their satisfaction and the building and grounds were safe, clean and sanitary. Tenant apartments were cleaned one time per week and the common areas were kept clean. No improvements were needed regarding housekeeping, laundry, and maintenance. The tenants described the staff as good and staff responded quickly when they called for assistance. The tenants received the services requested. They liked the food and the quantity and quality of the food was appropriate. There was a variety of foods served, and the hot foods were served hot and the cold foods were served cold. The meat was tender and there were no complaints regarding food. The tenants said there were enough activities and they did not request additional activities. The tenants enjoyed music, Bingo, card games and groups that visited. The tenants felt safe and made their own decisions. They felt comfortable living at the Program and would recommend it to others. The television reception had improved and the variety of television channels offered was appreciated.

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. Food Service

Monitoring Observation: The Program provided lunch and evening meals to the tenants. The Program was attached to a nursing facility and food was prepared at the nursing facility and brought to the Program.

There was also a kitchen located in the Program and the kitchen was observed. A review of the contents in the refrigerator and freezer revealed various items including ice cream and ice cream sandwiches, condiments, beverages, leftover food items and a bag of lettuce. Temperature records were maintained for the refrigerator and freezer. The kitchen had a dishwasher and dishes were washed after each meal. Records were maintained for the dishwasher. A couple times per week a lettuce salad was put into bowls and served to the tenants.

A license for the attached nursing facility and menus were provided. The kitchen appeared to be clean and records were maintained including those for the dishwasher, refrigerator and freezer.

Staff #1, #2, #3 and #4 had documented food safety training on topics which included training on food storage/leftovers, dishwasher operation, food temperatures and review of cleaning schedules/protocols. At the community meeting the tenants did not have any concerns or complaints regarding food. The Program's kitchen did not have a food license and washed dishes, stored food and prepared some food in the Program's kitchen.

Regulatory Insufficiency: Programs engaged in the preparation and service of meals and snacks shall meet the standards of state and local health laws and ordinances pertaining to the preparation and service of food shall be licensed pursuant to Iowa Code chapter 137F. (IAC r. 481-68.28(6))