IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

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RODNEY A. ROBERTS, DIRECTOR

August 1, 2014

Ms. Mary Eulberg, Director
River Living Center
831 South Hwy 52
Guttenberg, IA 52052

RE: Final Recertification Monitoring Evaluation Report – River Living Center, Guttenberg, IA

Dear Ms. Eulberg:

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, following a survey by DIA on **July 24, 2014.** The Report notes a Regulatory Insufficiency in the area(s) of: Evaluation of Tenant.

Each Regulatory Insufficiency requires that the Program submit a written Plan of Correction (POC).

In preparing the POC, please use the tenant identifiers from the Report, i.e. Tenant #1, when reference is made to specific tenants. If your response includes a specific tenant's assessment or service plan, it is the Program's responsibility to conceal the tenant's name in order to maintain the tenant's anonymity. Your response shall include the following:

1. Elements detailing how the Program will correct each regulatory insufficiency.
2. What measures will be taken to ensure the problem does not recur.
3. How the Program plans to monitor performance to ensure compliance.
4. The date by which the regulatory insufficiency will be corrected.

Please note that all regulatory insufficiencies must be **corrected within 30 days of the date of the exit conference**; however, there may be situations where the timeframe may be shortened or lengthened, at the discretion of the department.

The POC must be submitted/emailed to DIA to my attention within ten (10) working days of receipt of this letter. It may be necessary for DIA to revisit the Program to confirm progress in fulfilling the POC's corrective measures.

As provided by IAC rule 481-67.14, you are afforded one opportunity to refute cited regulatory insufficiencies through the informal conference process. A request for an informal conference must be made within 20 working days of the notice or service of this letter and the final report. Please refer to rule 67.14 for more information.

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.

Also enclosed you will find the Assisted Living Program Certificate **S0279** with effective dates of **July 14, 2014** through **July 13, 2016**.

If you have any questions in regard to this report, please contact me at 515/281-7039 or **Rose.Boccella@dia.iowa.gov**

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:

Mary Eulberg, Director
River Living Center
831 South Hwy 52
Guttenberg, Iowa 52052

Date of Monitoring Visit:

July 24, 2014

Monitor(s):

Stephanie Radabaugh, PhD

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:	6
Number of tenants with cognitive disorder:	0
Total Population of Program at time of on-site	6
TOTAL census of Assisted Living Program	6

Tenant/Family Satisfaction Results – A community meeting with three tenants was held. Maintenance and housekeeping services were timely and to the tenants' satisfaction. Tenants had no suggestions for improvements regarding housekeeping. They were happy with the activity program and had no suggestions for improvements. Nursing services were available upon request using the pendant. Tenants noted the response time for pendant usage was immediate. Tenants stated they liked the food served. It was mentioned a few food items were cooler than they would have liked on rare occasions, but expressed it could have been due to the family style serving which tenants were quite fond of. Tenants offered no suggestions for improvement. Tenants felt they had received the care they contracted for through the occupancy agreement. They were satisfied with the care they received and felt staff was well trained. The tenants all felt safe at the Program and stated they would and have recommended it to others.

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

A. Evaluation of Tenant

Monitoring Observation: Four tenant files were reviewed.

Tenant #1, an 87 year old, was admitted on 7-18-13 with a diagnosis of Parkinson's. An initial cognitive evaluation dated 7-18-13 was not completed by a registered nurse (RN) but by a licensed practical nurse (LPN). The initial cognitive evaluation was not completed by a RN.

Tenant #2, an 87 year old, was admitted on 7-18-13 with a diagnosis of a right arm fracture. An initial cognitive evaluation dated 7-18-13 was not completed by a RN but by a LPN. The initial cognitive evaluation was not completed by a RN.

Tenant #3, a 90 year old, was admitted on 10-1-13 with a diagnosis of glaucoma. An initial cognitive evaluation dated 10-1-13 was not completed by a RN but by a LPN. The initial cognitive evaluation was not completed by a RN.

Review of tenant files indicated initial cognitive evaluations were not completed by a health care professional or human service professional which would include a RN.

Regulatory Insufficiency: A program shall evaluate each prospective tenant's functional, cognitive and health status prior to the tenant's signing the occupancy agreement and taking occupancy of a dwelling unit in order to determine the tenant's eligibility for the program, including whether the services needed are available. The cognitive evaluation shall utilize a scored, objective tool. When the score from the cognitive evaluation indicates moderate cognitive decline and risk, the Global Deterioration Scale shall be used at all subsequent intervals, if applicable. If the tenant subsequently returns to the tenant's mildly cognitively impaired state, the program may discontinue the GDS and revert to a scored cognitive screening tool. The evaluation shall be conducted by a health care professional or human service professional. (IAC r. 481-69.22(1))