IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

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RODNEY A. ROBERTS, DIRECTOR

October 31, 2014

Mr. Jason Tjaden, Administrator
Clarence Assisted Living
408 2nd Avenue
Clarenee, IA 52216

RE: Final Recertification Monitoring Evaluation Report – Clarence Assisted Living, Clarence, IA

Dear Mr. Tjaden:

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 **October 20, 2014.** The Report notes a Regulatory Insufficiency in the area(s) of: Food Service.

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 **S0329** with effective dates of **July 5, 2014** through **July 4, 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:

Jason Tjaden, Administrator
Clarence Assisted Living
408 2nd Avenue
Clarence, IA 52216

Date of Monitoring Visit:

October 20, 2014

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:	17
Number of tenants with cognitive disorder:	0
Total Population of Program at time of on-site	17
TOTAL census of Assisted Living Program	17

Tenant/Family Satisfaction Results – A community meeting with 10 tenants was held. Housekeeping services were completed to their satisfaction. The building and grounds were safe, clean and sanitary. Laundry was returned was quickly. They said nursing services were available and there was an immediate response when they requested staff assistance. They were getting the services requested when the occupancy agreement was signed. The staff was described as exceptional, helpful and great. Staff knew was services to provide and was trained to provide those services. The tenants received all the cares requested. They liked the food and said there were a variety of foods offered. The hot foods were served hot most of the time and staff would heat up the food if needed. Cold foods were served cold. There were enough activities offered and they received an activity calendar. There were no suggestions for additional activities and they enjoyed Bingo, exercises and card games. The tenants felt safe and made their own decisions. They were generally satisfied with the Program and would recommend it to others. The tenants said they could bring concerns or questions to administrative staff and they followed up. The tenants enjoyed the socialization with other tenants and being able to decorate their apartments with personal items.

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

A. Food Service

Monitoring Observation: The Program was attached by structure to a nursing facility. The Program had a kitchen; however, the kitchen was not licensed. Meals were prepared at the nursing facility and served at the Program.

Observation indicated the Program had a kitchen had a commercial dishwasher, stove/oven, refrigerator with freezer and an upright freezer.

Observation of the kitchen indicated there were food items stored in the refrigerator including: cranberry, prune and orange juice in pitchers, milk in gallon containers, fruit cocktail in a plastic container, prunes in a container and salted butter. There was also applesauce, ketchup, mustard and salad dressings in bottles. The refrigerator freezer had butter and cupcakes. In the upright freezer there were loafs of bread, butter and orange juice in a container. There was also cereal in a container on top of the upright freezer.

Observation of a storage room revealed there was another refrigerator in the storage room. There were gallons of milk in the refrigerator and in the refrigerator freezer there was breakfast pastry bread.

The Nurse Manager said three meals per day were prepared at the nursing facility kitchen and brought to the Program in an enclosed cart. In regards to food preparation there were activities with food including a cookout once per month and breakfast to order which had been done once. The Nurse Manager or Staff #1 did the cooking for the breakfast to order and a griddle and electric skillet were used. Usually it was eggs and pancakes; however, bacon had also been prepared. In regards to food storage in the kitchen she said there was orange juice which was not single serve and milk which was not single serve. There was also cereal and cheese. She did not know if the cheese was individually wrapped.

The Nurse Manager said there had been no food related illness and there had been no complaints from the tenants regarding food. She said staff had food safety training. Temperature records were maintained for the dishwasher, refrigerator and freezer. She said the Program did not have a food license.

The Food Service Supervisor said three meals per day were prepared at the nursing facility. She said all of the preparation and cooking was done at the nursing facility. She said the dishes and silverware were washed in the dishwasher at the Program.

The October 2014 Activity Calendar reflected the breakfast to order was an activity on 10-9-14 at 7:00 a.m. The Program provided menus which were approved by a dietician.

The noon meal was observed on 10-20-14 and no concerns were noted. A community meeting with 10 tenants was held. They liked the food and said there were a variety of foods offered. The hot foods were served hot most of the time and staff would heat up the food if needed. Cold foods were served cold.

Observations, staff interviews and review of Program documents revealed the Program's kitchen was not licensed and the functions of the kitchen exceeded the parameters allowed without obtaining licensure.

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 and shall be licensed pursuant to Iowa Code chapter 137F. (IAC r. 481-69.28(6))