

INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

DEAN A. LERNER, DIRECTOR

PATTY JUDGE
LT. GOVERNOR

June 30, 2009

Daniel E. Thomas, Administrator
Ballard Creek Community Assisted Living
908 N US Highway 69
Huxley, IA 50124-9764

RE: Recertification Monitoring Evaluation Report, Ballard Creek Community Assisted Living, Huxley, IA

Dear Mr. Thomas:

Enclosed is the **Recertification Monitoring Evaluation Report** completed by the Department of Inspections and Appeals (DIA) pursuant to the Code of Iowa Chapter 231C and the Iowa Administrative Code Chapter 25. **No Regulatory Insufficiencies were found during this evaluation.**

The review of the recertification documents you submitted has been completed and 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 #S0007 with effective dates of **May 31, 2009 through May 31, 2011**. This certificate must be posted in the building for public viewing.

If you have any questions regarding this certification, please contact me at 515-281-5003.

Sincerely,



Connie Schaffer
Certification Coordinator – Central Iowa
Health Facilities Division
Adult Services Bureau

LUCAS STATE OFFICE BUILDING, 321 EAST 12TH STREET, DES MOINES, IOWA 50319-0083

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**Iowa Department of Inspections and Appeals
Assisted Living Program
Final Recertification Monitoring Evaluation Report**

Assisted Living Program:

Daniel E. Thomas, Administrator
Ballard Creek Community Assisted Living
908 N US Highway 69
Huxley, IA 50124-9764

Date of Monitoring Visit:

June 16, 2009

Monitor(s):

Michael Streepy RN

Definitions:

The following definitions are relevant:

Regulatory Insufficiency - A violation of a statutory or rule provision within the Iowa Code or 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 rule violations [321 IAC 25.8(3)]. The plan should identify how, and by a specific date, an insufficiency will be corrected. The plan is due to DIA within ten (10) working days of the program's receipt of a Recertification Monitoring Evaluation Report. Depending on the circumstances, DIA may revisit the assisted living program to confirm progress in fulfilling a plan's corrective measures.

Dementia-specific assisted living program - An assisted living program certified under this chapter that either serves five or more tenants with dementia or cognitive disorder staged between 4 and 7 on the Global Deterioration Scale or holds itself out as providing specialized care for persons with cognitive disorder or dementia, such as Alzheimer's disease, in a dedicated setting.

Overview:

An on-site monitoring evaluation was conducted at Ballard Creek Community Assisted Living on June 16, 2009. In preparing this report, the following information was considered:

Current Program Census:

General Population Program (GPP)* – A program that is not a Dementia Specific program, but may have tenants with cognitive disorder.

Current number of tenants without cognitive disorder: 26

Current number of tenants with cognitive disorder: 3

Total Population: 29

Dementia Specific Program (DSP)* – Not applicable.

***These are the census numbers represented by the program to be applicable at the time of the on-site.**

Tenant/Family Satisfaction Results – A community meeting was held with 13 tenants attending. The tenants stated the living environment is very nice and well maintained and staff are wonderful, helpful and kind. The tenants stated the food is good and there are plenty of activities with a good variety. Tenants stated the only thing staff or administrator could do to make the program better, would be to provide more entertainment on Saturdays. The tenants feel safe in the program, participate in the fire drills and make their own decisions. The tenants stated they are receiving services as expected and are aware of limitations. The tenants stated they were satisfied with the program and would recommend it to friends and family members.

Program History – There have been no substantiated Regulatory Insufficiencies during this certification period.

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

At the time of the monitoring visit the program was found to be in substantial compliance.

Dated this 30th day of June, 2009.