IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

HEALTH FACILITIES DIVISION
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KIM REYNOLDS
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RODNEY A. ROBERTS, DIRECTOR

May 28, 2013

Ms. Kathy Gerdes, Administrator
Franken Manor Assisted Living
527 South Main Street
Sioux Center, IA 51250

RE: Final Recertification Monitoring Evaluation Report – Franken Manor Assisted Living, Sioux Center, IA

Dear Ms. Gerdes:

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 Insufficiencies, 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 **S0076** with effective dates of **April 24, 2013** through **April 23, 2015**.

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:

Kathy Gerdes, Administrator
Franken Manor Assisted Living
527 South Main Street
Sioux Center, IA 51250

Date of Monitoring Visit:

April 4, 2013

Monitor(s):

Lori Miner, RN BSN

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:	27
Number of tenants with cognitive disorder:	2
Total Population of Program at time of on-site	29
TOTAL census of Assisted Living Program	29

Tenant/Family Satisfaction Results – A meeting was held with 11 tenants. The best thing about the program was the food and the friendship. Housekeeping was completed to the tenants' satisfaction in apartments and common areas. The tenants used a call cord located within the apartment to summon help if needed. Staff was reported to respond in less than five minutes. The staff members provided very good care and treated the tenants with kindness and respect. The food was mostly good with hot foods served hot most of the time. The tenants reported food could be reheated if not hot enough. There were enough activities offered with no suggestions for improvement. The tenants reported feeling safe and would recommend the program 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. Evaluation of Tenant

Monitoring Observation: The program provided a list of tenants which indicated 12 tenants were "assisted living" tenants. The program identified 17 tenants as "independent living." According to the Inspections and Appeals website, Franken Manor was certified for 60 tenants. Registered Nurse #1 (RN #1) indicated there were 30 apartments in the assisted living program. RN #1 stated there were tenants that required no services and were considered independent. Independent tenants also signed an occupancy agreement different from those considered to be assisted living. RN #1 and RN#2 both stated the independent tenants did not have evaluations completed prior to admission and within 30 days of admission.

The entire building of 30 apartments was certified as an assisted living program. The program identified 17 tenants (#1 through #17) that had not had evaluations completed. The program did not provide documentation of completed evaluations for 17 tenants who resided in a certified assisted living program.

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(21))

Regulatory Insufficiency: A program shall evaluate each tenant's functional, cognitive and health status within 30 days of occupancy. A program shall also evaluate each tenant's functional, cognitive and health status as needed with significant change, but not less than annually, to determine the tenant's continued eligibility for the program and to determine any changes to services needed. The evaluation shall be conducted by a health care professional or human service professional. A licensed practical nurse may complete the evaluation via nurse delegation when the tenant has not exhibited a significant change. (IAC r. 481-69.22(2))

B. Food Service

Monitoring Observation: Upon entering the program, a dietary staff person was observed frying eggs and bacon in the assisted living program. The dietary staff person indicated the hot breakfast was served twice a week to the assisted living tenants. Staff #1 also stated the dietary staff from the hospital came to prepare a hot breakfast twice a week, otherwise a continental breakfast was served.

The program provided documentation of a food license from the hospital which provided food to the assisted living program. The assisted living program did not have a food license.

According to the Dietary Manager, he had contacted the local health department in December of 2012 as to the need for a food license at the assisted living program, but had not heard back from the health department.

According to the Dietary Manager, the kitchen in the assisted living program was not inspected. The kitchen was observed to have a non-commercial stove/oven and a non-commercial microwave oven/hood over the stove. The hood was not in use during the preparation of the eggs and bacon. The program was also noted to have a dishwasher and washed dishes in the assisted living program.

Iowa Code chapter 137F.4 states a food establishment requires a food license. A food establishment is defined as an operation that stores, prepares, packages, serves or otherwise provides food for human consumption.

The assisted living program did not have a food license to prepare and serve food in the assisted living program.

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. 481-70.28(6))