IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

December 1, 2010

Ms. Shirley Givant, Administrator
Country Haven Guest Home, LTD
2490 Prairieview Avenue
Winterset, IA 50273

RE: Final Recertification Monitoring Evaluation Report – Country Haven Guest Home, LTD, Winterset, IA

Dear Ms. Givant:

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 **S0146** with effective dates of **June 13, 2010** through **June 12, 2012**.

If you have any questions in regard to this certification, please contact me at 515/281-7039.

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:

Ms. Shirley Givant, Administrator
Country Haven Assisted Living
2490 Prarieview Avenue
Winterset, IA 50273

Date of Monitoring Visit:

September 16, 2010

Monitor(s):

Hal L. Chase, RN BSN MPH

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. IAC r. 481-67.10(5). 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 481 IAC chapter 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 or serves 55 or more tenants and 10 percent or more of the tenants have dementia between Stages 4 and 7 on the Global Deterioration Scale or holds itself out as providing specialized care for persons with dementia, such as Alzheimer's disease, in a dedicated setting.

Overview:

An on-site monitoring evaluation was conducted at Country Haven Assisted Living on September 16, 2010. 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:	7
Current number of tenants with cognitive disorder:	2
Total Population:	9

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 eight tenants. Tenants reported they liked living at the program and felt it was like living at home. Tenants reported staff was polite and cared about them like they were a family member and they received the services they needed. Tenants reported they felt safe living at the program and made their own decisions related to their care. Tenants reported the food was good and no complaints were reported. Tenants stated there were activities throughout the day and they enjoyed the activities offered. Tenants stated they were generally satisfied living at the program and would recommend it to their friends.

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.

A. Evaluation of Tenant

Monitoring Observation: Four files were reviewed. Tenant #1, an 84 year old, was admitted on 4-4-09 and had a diagnosis of Alzheimer's Disease. The tenant was staged at four on the Global Deterioration Scale (GDS) on 6-29-10, which indicated moderately severe cognitive decline. Annual functional and cognitive evaluations were completed on 6-29-10, but an annual health evaluation was not completed.

Tenant #2, a 92 year old, was admitted on 1-20-09 and had a diagnosis of Dementia. The tenant was staged at four on the GDS on 1-16-10, which indicated moderate cognitive decline. Annual functional and cognitive evaluations were completed on 1-16-10, but an annual health evaluation was not completed

Tenant #3, a 95 year old, was admitted on 5-5-10 and had diagnoses of: History of a Right Lower Pneumonia, Exacerbation of Chronic Obstructive Pulmonary Disease (COPD), Hypertension and Atrial Fibrillation. The program completed a cognitive evaluation on 4-28-10 and completed a functional evaluation after the tenant was admitted to the program on 5-12-10. A health evaluation was not completed. The program did not complete a functional, cognitive and health evaluation within 30 day of admission to the program.

Tenant #4, a 92 year old, was admitted on 4-17-10 and had diagnoses of: Pneumonia, COPD, Diabetes Mellitus, Atrial Fibrillation and Prostate Cancer. Functional and cognitive evaluations were completed on 4-18-10; one day after the tenant was admitted to the program. The program did not complete a health evaluation. The program did not complete functional, cognitive and health evaluations within 30 days of admission to the 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 (1))

- 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. Service Plan

Monitoring Observation: Four files were reviewed.

Tenant #2's annual service plan update was not supported by an annual health evaluation.

Tenant #3's initial service plan was not supported by a health evaluation. A service plan was completed on 6-29-10, but wasn't completed within 30 days of admission and was not supported by functional, cognitive and health evaluations.

Tenant #4's initial service plan was not supported by a health evaluation. A service plan was completed on 6-29-10, but wasn't completed within 30 days of admission and was not supported by functional, cognitive and health evaluations.

- Regulatory Insufficiency: A service plan shall be developed for each tenant based on the evaluations conducted in accordance with subrules 69.22(1) and 69.22(2) and shall be designed to meet the specific service needs of the individual tenant. The service plan shall subsequently be updated at least annually and whenever changes are needed. IAC r.481-69.26 (1)

- Regulatory Insufficiency: Prior to the tenant's signing the occupancy agreement and taking occupancy of a dwelling unit, a preliminary service plan shall be developed by a health care professional or human service professional in consultation with the tenant and, at the tenant's request, with other individuals identified by the tenant, and, if applicable, with the tenant's legal representative. All persons who develop the plan and the tenant or the tenant's legal representative shall sign the plan. IAC r. 481-69.26 (1)

- Regulatory Insufficiency: When a tenant needs personal care or health-related care, the service plan shall be updated within 30 days of the tenant's occupancy and as needed with significant change, but not less than annually. IAC r. 481-69.26 (3)

Dated this 14th day of October, 2010.