IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

TERRY E. BRANSTAD
GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

October 3, 2011

Ms. Victoria Huffman, Administrator
Emerson Point
1355 Shannon Drive
Iowa City, IA 52246

RE: Final Recertification Monitoring Evaluation Report – Emerson Point, Iowa City, IA

Dear Ms. Huffman:

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 Insufficiency, 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 **S0181** with effective dates of **September 24, 2011** through **September 23, 2013**.

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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:

Victoria Huffman, Administrator
Emerson Point
1355 Shannon Drive
Iowa City, IA 52246

Date of Monitoring Visit:

September 14, 2011

Monitor(s):

Stephanie Cummins, MA
Margaret Kaltefleiter, RN MS

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:

An on-site monitoring evaluation was conducted at Emerson Point on September 14, 2011. 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:	48
Number of tenants with cognitive disorder:	0
Total Population of Program at time of on-site	48
TOTAL census of Assisted Living Program	48

Tenant/Family Satisfaction Results – A community meeting with 14 tenants was held. The majority of the tenants were satisfied with housekeeping services and indicated the dining room was clean. They requested staff slow down and clean and dust more thoroughly. The tenants said nursing services were available and they had two of the "best nurses" around. Staff responded within minutes or immediately when they called for assistance. Most tenants described staff as efficient and said they were trained to provide the services requested. The tenants liked the food and stated the quantity and temperature of the food was appropriate. They requested less chicken and broccoli and more sugar free desserts and ice cream. The tenants felt safe and made their own decisions. They were satisfied with the Program and would recommend it to others. The tenants stated they enjoyed the people at the Program.

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. Service Plan

Monitoring Observation:

Tenant #1 (the Tenant), an 84 year old, was admitted on 4-24-10 and diagnoses include: Depressive Disorder, Hypertension, Muscle Weakness and late effect Cerebrovascular Disease. The Tenant had a Managed Risk Agreement regarding making comments of a sexual nature to staff and grabbing at staff and tenants' buttocks. The Tenant denied making those kinds of comments or touching anyone; however, agreed to refrain from any in the future. The agreement was dated 6-20-11. The service plan did not address the Tenant's behavior or provide interventions regarding the behavior. The service plan did not address the Tenant's identified needs and preferences for assistance.

Tenant #2 (the Tenant), a 75 year old, was admitted on 9-29-04 and diagnoses include: Osteoarthritis, Aortic Valve Disorder, Ventricular Fibrillation, Diabetes Mellitus Type II and Venous Insufficiency. The Tenant received assistance with peri-care two times per day, according to the service plan. From 8-15-11 to 9-13-11 the Tenant refused assistance with peri-care nine times, according to Consumer Directed Attendant Care Daily Service Records. Staff #1 and Staff #2 identified the Tenant refused assistance with peri-care. The service plan did not address the refusal of peri-care and interventions related to the refusals. The service plan did not address the Tenant's identified needs and preferences for assistance.

- Regulatory Insufficiency: The service plan shall be individualized and shall indicate, at a minimum: The tenant's identified needs and preferences for assistance. (IAC r. 481-69.26(4)(a))

Dated this 30th day of September, 2011.