IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

March 4, 2009

Margaret Stickley, Administrator
Woodland Park Assisted Living
1207 E 3rd St
Anamosa, IA 52205-1569

RE: Recertification Monitoring Evaluation Report, Woodland Park Assisted Living, Anamosa, IA

Dear Ms. Stickley:

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.**

All recertification documents you submitted have been received. 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 **#S0253** with effective dates of **March 12, 2009** through **March 11, 2011.** This certificate must be posted in the building for public viewing.

If you have any questions regarding this certification, please contact me at 515-281-4116.

Sincerely,

Chris Nothaft
Certification Coordinator – Eastern Iowa
Adult Services Bureau

Enclosure

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

Assisted Living Program:

Margaret Stickley, Administrator
Woodland Park Assisted Living
1207 E 3rd St
Anamosa, IA 52205-1569

Date of Monitoring Visit:

February 24, 2009

Monitor(s):

Stephanie Cummins, MA

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 Woodland Park on February 24, 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:	14
Current number of tenants with cognitive disorder:	0
Total Population:	14

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 with 11 tenants and 2 tenant interviews was held. The tenants do not have any issues or concerns with housekeeping, laundry or maintenance. They indicate the bed linens are laundered and their apartments are cleaned once a week. The tenants describe staff as caring, thorough, kind and "bubbly." They state their needs are met and staffing is sufficient. Tenants do not have any concerns or issues with the response from the care center after hours. One tenant reported he/she requested assistance from the attached care center and staff responded in about two minutes. Tenants state the Director is one of the best. In regard to meals, tenants do request more seasoning be available to season their food and more diabetic options be available. They state the meat is tough and dry, at times, and whether there is a variety of foods or not, goes in spurts. The vegetables are not always hot; however, the soup is served at an appropriate temperature. They indicate the desserts are good and they receive a sufficient amount of food. Tenants report they have voiced concerns regarding some issues related to food and these issues were resolved. A recycling program for paper products was suggested as an improvement. Tenants indicate there are sufficient activities and they receive an activity calendar. They enjoy Bingo, exercises and outings and they indicate their right to decline attendance at activities is respected. Tenants feel safe and report they have routine fire drills. They are getting what they signed up for upon admission, make their own decisions and one tenant states he/she enjoys his/her independence and decides what to do, when to do it and where to go. Tenants report the nurse is available when needed. Tenants are satisfied with the program and would recommend it to others.

Program History – There were no substantiated Regulatory Insufficiencies this certification period.

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

There were no regulatory insufficiencies found during this recertification monitoring evaluation visit.

Dated this 3rd day of March, 2009.