IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

DEAN A. LERNER, DIRECTOR

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

November 1, 2010

Ms. Christine Vasquez, Administrator
Walden Point Assisted Living
1200 4th Street
Des Moines, IA 50314

RE: Final Recertification Monitoring Evaluation Report – Walden Point Assisted Living, Des Moines, IA

Dear Ms. Vasquez:

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 **S0240** with effective dates of **July 27, 2010** through **July 26, 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. Christine Vasquez, Administrator
Walden Point Assisted Living
1200 4th Street
Des Moines, IA 50314

Date of Monitoring Visit:

September 23, 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 Walden Point Assisted Living on September 23, 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:	51
Current number of tenants with cognitive disorder:	0
Total Population:	51

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 51 tenants. Tenants stated they liked living at the program. The building and grounds were well maintained and housekeeping does a good job keeping their apartments clean. Tenants stated staff was kind and provided excellent care. Tenants stated the food was good and a variety was offered; however, the food wasn't always prepared as they would like. Tenants stated they enjoy the activities offered. Tenants feel safe, are getting the services they expect and make their own decisions. Tenants stated they are satisfied with the program and would recommend it to their friends and family.

Program History – There have been substantiated Regulatory Insufficiencies in the areas of Other and Staffing during this certification period.

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

A. Evaluation

Monitoring Observation: Six files were reviewed. Tenant #3, an 83 year old, was admitted on 3-6-10 and has diagnoses of: DM II, Renal Hypertension (HTN) and End Stage Renal Disease. Nurse's notes of 8-23-10 indicated the tenant was hospitalized on 8-10-10 and returned to the program on 8-20-10. Functional, cognitive and health evaluations were completed on 8-22-10, two days after the tenant returned to the program and indicated the tenant was unable to stand up out of a chair independently and needed assistance with ambulation and transfer of one staff at all times.

- 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: A service plan of 6-17-10 indicated the tenant was independent with the use of a cane and wheeled walker. Evaluations completed on 8-22-10 indicated the tenant was unable to stand up out of a chair independently and needed assistance with ambulation and transfer of one staff at all times. The service plan was not updated as needed, with a significant change in status.

Tenant #6, a 76 year old, was admitted on 3-6-10 and has diagnoses of HTN and Diabetes Mellitus. Medication Administration Records for September, 2010 indicated staff was to notify the registered nurse if the tenant's blood sugar fell below 60mg/dl or were above 300mg/dl. Blood sugar log of 4-10-10 through 9-19-10 indicated at least 22 incidents of the tenant's blood sugar below 60mg/dl. The tenant's service plan of 8-11-10 did not establish interventions for staff to follow to elevate the tenant's blood sugar when it was low.

- 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 and if a significant change triggers the review and update of the service plan, the updated service plan shall be signed and dated by all parties. (IAC r. 481-69.26(3)

- 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)

Dated this 25th day of October, 2010.