

CHESTER J. CULVER  
GOVERNOR

PATTY JUDGE  
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

March 22, 2010

Mr. Patrick Tomscha, Administrator  
Holy Spirit Assisted Living  
1701 West 25th Street  
Sioux City, IA 51103

**RE: Final Recertification Monitoring Evaluation Report – Holy Spirit Assisted Living, Sioux City, IA**

Dear Mr. Tomscha:

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 the Iowa Administrative Code (IAC) chapters 481–67 and 481–69. **No Regulatory Insufficiencies were found during this evaluation.**

The review of the recertification documents you submitted has been completed and 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 **S0038** with effective dates of **March 8, 2010** through **March 7, 2012**.

If you have any questions regarding this certification, please contact me at 515/281-5721.

Sincerely,

*Tamara Halvorson*

Tamara Halvorson  
ASB Lead Certification Coordinator  
Adult Services Bureau

Enclosure

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

**Assisted Living Program:**

Patrick Tomscha, Administrator  
Holy Spirit Assisted Living  
1701 West 25<sup>th</sup> Street  
Sioux City, IA 51103

**Date of Monitoring Visit:**

March 16, 2010

**Monitor(s):**

Michael Streepy, RN

**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 Holy Spirit Assisted Living on March 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: 22

Current number of tenants with cognitive disorder: 1

Total Population of GPP: 23

**Dementia Specific Program (DSP)\*** – A program that is dementia specific and provides specialized care in a dedicated setting.

Total Population of DSP: 11

**Total Census of ALP:** 34

**\*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 16 tenants. The tenants stated the living environment is excellent and well maintained. Staff are polite, courteous and well trained for services. The tenants stated the food is good with a variety offered and substitutes available. Food temperatures are good but they feel the vegetables are over cooked. Activities are good with a variety offered but they would like more Bingo and maybe a bus trip to the casino. The tenants stated they are aware of limitations to the program. They make their own decisions and come and go as they please without restriction. The tenants are satisfied with medical services with good response from aides and nursing staff. Staff respond to requests for assistance within 5 minutes at the most. The tenants are generally satisfied with the program and stated they would recommend it to friends and family members.

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

**On-Site Monitoring Evaluation** – The monitor(s) made the observations detailed in the following areas. At the time of the monitoring visit, the program was found to be in substantial compliance with the regulations.

Dated this 19<sup>th</sup> day of March, 2010.