IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

March 25, 2010

Ron Osby, Administrator
Arbor Heights at University Assisted Living
233 University Avenue
Des Moines, IA 50314-3124

Dear Mr. Osby:

The Department of Inspections and Appeals (DIA) has completed the review of the Assisted Living Program recertification requirements for your program.

The review of the recertification documents you submitted has been completed and the documents are accepted. In addition, the State Fire Marshall's (SFM) inspection report has been received as well as the Facility Engineer's approval of the Evacuation Plans for your program. The Recertification Monitoring Evaluation report was previously sent to your program and the Plan of Correction has been accepted.

All recertification requirements have been completed. Enclosed you will find the Assisted Living Program Certificate # **S0072** with effective dates of **March 31, 2010** through **March 30, 2012.** This certificate must be posted in the building for public viewing.

If you have any questions regarding this certification, you may contact me at 515-281-5003.

Sincerely,

Connie Schaffer

Connie Schaffer
Certification Coordinator – Central Iowa
Health Facilities Division
Adult Services Bureau

Enclosure

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

Assisted Living Program:

Ron Osby, Administrator
Arbor Heights at University Assisted Living
233 University Avenue
Des Moines, IA 50314-3124

Date of Monitoring Visit:

March 10, 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 Arbor Heights at University Assisted Living on March 10, 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:	23
Current number of tenants with cognitive disorder:	0
Total Population:	23

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 24 tenants and one family member in attendance. Tenants stated they liked living at the program, felt safe and were getting the services they expected. Staff were polite, courteous and were trained to provide the services needed. The manager listened to their concerns and finds solutions when needed. Nursing services were available and staff responded within ten minutes of being called. Tenants made their own decisions and were aware of their rights. A good variety of fresh fruits and vegetables were offered and tenants liked the food offered. Tenants stated there was plenty of activities offered, were generally satisfied with the program and would recommend it to anyone.

Program History – There was a substantiated Regulatory Insufficiency found in the area of Nurse Review during this certification period.

On-Site Monitoring Evaluation – The monitor(s) made the observations detailed in the following areas. There were no regulatory insufficiencies during this on-site investigation.

Dated this 22nd day of March, 2010.