IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

February 10, 2010

Mary Glenn, Administrator
Rose of Waterloo
421 Oak Ave.
Waterloo, IA 50703-3401

RE: Recertification Monitoring Evaluation Report, Rose of Waterloo, Waterloo, IA

Dear Ms. Glenn:

Enclosed is the **Recertification Monitoring Evaluation Report** completed by the Department of Inspections and Appeals (DIA) pursuant to the Iowa Code chapter 231C and 481 Iowa Administrative Code chapter 67 and 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 **#S0266** with effective dates of **January 2, 2010** through **January 1, 2012.** This certificate must be posted in the building for public viewing.

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

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:

Mary Glenn, Administrator
Rose of Waterloo Assisted Living
421 Oak Ave.
Waterloo, IA 50703-3401

Date of Monitoring Visit:

January 12, 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 Rose of Waterloo Assisted Living on January 12, 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:	69
Current number of tenants with cognitive disorder:	0
Total Population:	69

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 49 tenants. Tenants stated it was a nice place to live and felt grateful the program was available, with one tenant stating "I adore it." Tenants stated staff were polite, courteous and trained to provide the services they needed. Tenants stated the Administrator and nurse were available when needed and cared about the tenants. The Administrator had an open door policy, which made living at the program more enjoyable. Tenants stated the food was good, with a variety of fruits and vegetables offered. Tenants stated alternative entrées were available if tenants wanted something that wasn't on the menu. Tenants stated there were enough activities but would like to see more activities for men. Tenants made their own decisions and could call staff when needed, knowing staff would respond quickly. Tenants stated they felt safe, were receiving the services they needed and would recommend the program to friends and family.

Program History – There have been no substantiated Regulatory Insufficiencies during this recertification period.

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

Dated this 10th day of February, 2009.