IOWA DEPARTMENT OF
INSPECTIONS & APPEALS

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RODNEY A. ROBERTS, DIRECTOR

January 28, 2013

Mr. Stephen King, Administrator
Rose of Ames Assisted Living
1315 Coconino Road
Ames, IA 50014

RE: Final Recertification Monitoring Evaluation Report – Rose of Ames Assisted Living, Ames, IA

Dear Mr. King:

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 **S0209** with effective dates of **February 25, 2013** through **February 24, 2015**.

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:

Stephen King, Administrator
The Rose of Ames Assisted Living
1315 Coconino Road
Ames, IA 50014

Date of Monitoring Visit:

December 19, 2012

Monitor(s):

Lori Miner, RN BSN

Definitions: ***The following definitions are relevant:***

Assisted Living Program – A program certified under 481 IAC 69 that provides housing with contracted services to three or more tenants in a physical structure that provides a homelike environment. Services may include but are not limited to health-related care, personal care, and assistance with instrumental activities of daily living. A General Population Program is an Assisted Living Program that is not dementia-specific but may have tenants with cognitive disorder.

Dementia-Specific Assisted Living Program - An assisted living program certified under 481 IAC 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 (GDS), or serves 55 or more tenants and 10 percent or more of the tenants have dementia between Stages 4 and 7 on the GDS, or holds itself out as providing specialized care for persons with dementia, such as Alzheimer's disease, in a dedicated setting.

Regulatory Insufficiency - A violation of a statutory or rule provision within the Code of Iowa (2011) or the 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 statutory or rule violations. The plan should identify how and by what date each regulatory insufficiency will be corrected, and what measures will be taken to ensure the problem does not recur. The plan is due to DIA within ten (10) working days of the program's receipt of a Complaint/Incident Investigation Report. Depending on the circumstances, DIA may revisit the assisted living program to confirm progress in fulfilling a plan's corrective measures.

Overview: ***In preparing this report, the following information was considered:***

Current Program Census

Assisted Living Programs are defined by the type of population served. The census numbers were provided by the Program at the time of the on-site.

General Population Program	
Number of tenants without cognitive disorder:	55
Number of tenants with cognitive disorder:	0
Total Population of Program at time of on-site	55
TOTAL census of Assisted Living Program	55

Tenant/Family Satisfaction Results – A meeting was held with 15 tenants. The best thing about the program was the friendly staff and a sense of family. Housekeeping was mostly completed to tenant's satisfaction in apartments; common areas were kept clean and neat. Tenants used a pendant to request assistance and staff members were reported to respond in less than five minutes to those requests. Care was described as good with staff members treating tenants kindly and respectfully. Food was described as good, with a variety of foods offered. Hot foods were served hot. There were enough activities offered with suggestions for computer training and beginning sign language. Tenants reported making their own decisions, and would generally recommend the program to others.

Program History – The program did not receive any regulatory insufficiencies during this certification period.

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

A. Service Plan

Monitoring Observation: Tenant #1, a 73 year-old, was admitted on 3-23-12 and had diagnoses of: Aseptic Necrosis of the Bone with Left Hip Replacement, Uterine Prolapse, Vulvodynia, Osteoporosis, Pacemaker, Urinary Incontinence, Hyperlipidemia, Gastroesophageal Reflux Disease, and Depressive Disorder. Evaluations were completed on 5-10-12 following hip replacement surgery. Tenant #1 was to receive assistance with bathing, as well as medication set-up, a change from pre-operative needs. The service plan was updated on 5-10-12 but did not include Tenant #1's signature. The service plan indicated the program no longer set up medications but rather the family assisted with medication set up, and assistance with bathing was discontinued on 6-10-12. Evaluations on 8-20-12 indicated Tenant #1 would receive medication set-up by the program as well as homemaker services, a change in services. The service plan was updated on 8-20-12, but did not include Tenant #1's signature.

The functional evaluation dated 8-20-12 indicated Tenant #1 required assistance with ambulation and used a walker. A functional assessment dated 9-3-12 following a fall indicated Tenant #1 required assistance with ambulation and used a walker. Documentation also indicated Tenant #1 was reminded to use a walker at all times. The

service plan did not identify Tenant #1 as requiring assistance with ambulation, the use of a walker, or reminders to use the walker. The service plan was not based on evaluations.

Tenant #2, a 76 year-old, was admitted on 6-1-08 and had diagnoses of: Diabetes Mellitus Type II, Spinal Stenosis with fusion June 2012, Hypertension, Pacemaker, Polyarthritis, Esophageal Reflux, and Depressive Disorder. Evaluations were completed on 10-26-12. The Mini Mental Assessment was not tabulated, but appeared to indicate no impairment. A service plan was completed on 10-26-12. The service plan was not signed by Tenant #2.

The functional assessment dated 10-26-12 indicated Tenant #2 required assistance with ambulation and used a walker. The health evaluation indicated Tenant #2 used a Bi-Pap. The service plan dated 10-26-12 and the associated Home Care Aide Care Plan dated 10-26-12 did not identify Tenant #2 as requiring assistance with ambulation, the use of a walker, or Bi-Pap. The service plan indicated the nurse was to be alerted if Tenant #2 had sadness or suicidal ideations. The Home Care Aide Care Plan did not contain those instructions. Tenant #2 was admitted to the hospital on 12-10-12 for depression. The service plan was not based on evaluations.

Regulatory Insufficiency: A service plan shall be developed for each tenant based on the evaluations conducted in accordance with subrules 69.22(1) and 69.22(2) and shall be designed to meet the specific service needs of the individual tenant. The service plan shall subsequently be updated at least annually and whenever changes are needed. (IAC r. 481-69.26(1))

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. (a)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)(a))