

TERRY E. BRANSTAD
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RODNEY A. ROBERTS, DIRECTOR

November 5, 2013

Ms. Nwanneka Eke, Administrator
Rose of Des Moines
1330 19th Street
Des Moines, IA 50314

**RE: Final Recertification Monitoring Evaluation Report -- Rose of Des Moines,
Des Moines, IA**

Dear Ms. Eke:

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 Insufficiency, 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 **S0223** with effective dates of **December 5, 2013** through **December 4, 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:

Nwanneka Eke, Administrator
The Rose of Des Moines
1330 19th Street
Des Moines IA 50314

Date of Monitoring Visit:

August 28, 2013

Monitor(s):

Lori Miner, RN BSN
Joyce Kix, RN

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:	51
Number of tenants with cognitive disorder:	0
Total Population of Program at time of on-site	51
TOTAL census of Assisted Living Program	51

Tenant/Family Satisfaction Results –A meeting was held with 14 tenants. The best thing about the program was the activities and the feeling of safety. Housekeeping was completed in tenant apartments for those receiving waiver services. Tenants reported using a call button to request assistance and staff responded in less than 15 minutes. Staff members knew what services to provide by using a list or the tenant would tell staff what to do. Some tenants thought the food was good, others not so good. A variety of foods were offered. Hot foods were mostly hot or could be reheated. Tenants noted there had been a change in service providers and the new provider was working to improve activities. Tenants did voice concern because coffee was no longer available in the mornings prior to breakfast. Tenants reported feeling safe at the program and would recommend the program to others.

Program History – During the course of the Recertification visit conducted on August 28, 2013, the program received a regulatory insufficiency in the areas of: Background Checks.

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

A. Record Checks

Monitoring Observation: Freedom Home Health was providing 24-hour staffing services to The Rose of Des Moines. Staff #1, Homemaker/Home Health Aide, was employed by Freedom Home Health on 6-4-13. On 5-7-13, background checks for child and dependent adult abuse registries were completed with no records found. The criminal history check completed on the same date indicated further research was required. On 5-10-13 the Division of Criminal Investigation returned a history. There was no documentation from the Department of Human Services to indicate Staff #1 had been approved to work for Freedom Home Health.

Regulatory Insufficiency: Pursuant to Iowa Code section 135C.33, a prospective employee of a program shall have a criminal history check, dependent adult abuse check, and child abuse check performed before the prospective employee begins work. If a prospective employee has a criminal history or an abuse history, the prospective employee shall not be employed by the program unless the department of human services

has performed an evaluation and determined that the record does not warrant the employment prohibition. Proof of the preemployment background check shall be maintained in the program's employee file. The program must meet all requirements of Iowa Code section 135C.33 and administrative rules adopted pursuant to Iowa Code section 135C.33. (IAC r. 481-67.9(3))