

## DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>S0348</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>08/17/2021</b>
NAME OF PROVIDER OR SUPPLIER  <b>EAGLE POINTE PLACE</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2700 MATTHEW JOHN DRIVE DUBUQUE, IA 52002</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments  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.  Number of tenants without cognitive disorder: 53  Number of tenants with cognitive disorder: 4  TOTAL census of Assisted Living Program: 57  The following regulatory insufficiency was cited during the investigation of Mandatory Report #97518-M and Mandatory Report #97371-M.	A 000	POC OK 1/7/22	
A 410	481-67.19(3)b Record Checks  67.19(3)b Conducting a background check. The program may access the single contact repository (SING) to perform the required background check. If the SING is used, the program shall submit the person's maiden name, if applicable, with the background check request. If SING is not used, the program must obtain a criminal history check from the department of public safety and a check of the child and dependent adult abuse registries from the department of human services.  This REQUIREMENT is not met as evidenced by: Based on interview and record review, the Program failed to ensure 2 of 2 staff hired through staffing agencies had background checks completed by the Single Contact Repository or by a combination of the Department of Public Safety and the Department of Human Services. Findings include:	A 410	On 1-1-2021, Executive Director (ED) removed Staff I, and on 5-10-21 Staff K, from providing services at the community until required background check using single contact repository (SING) or if SING is not used, obtaining a criminal history check from the department of public safety and a check of the child and dependent adult abuse registries from the department of human services.  On 10/28/21, Executive Director & RDCS conducted audit of current personnel records, and on 12/14/21, Executive Director notified companies that provide agency personnel, to ensure required background check using SING or if SING is not used, a criminal history check from the department of public safety and a check of the child and dependent adult abuse registries from the department of human services is complete and in file. Identified staff without required background check will be immediately removed from providing services at the community until requirement is met.	

DIVISION OF HEALTH FACILITIES - STATE OF IOWA  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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A 410	<p>Continued From page 1</p> <p>A review of Staff I's personnel record on 7/27/21 revealed she was contracted through the staffing agency, LeaderStat. Staff I picked up available shifts at the Program between 12/22/20 and 1/1/21. A review of the personnel file showed a background check completed by LeaderStat, utilizing the background check service, PreciseHire. LeaderStat did not utilize the Single Contact Repository or a combination of the Department of Public Safety and the Department of Human Services to obtain the background history of Staff I. The Program failed to ensure the staffing agency utilized the appropriate background check service.</p> <p>A review of Staff K's personnel record on 7/29/21 revealed she was contracted through the staffing agency, Sedona Staffing Services. Staff K picked up available shifts at the Program between 4/22/21 and 5/10/21. A review of the personnel file showed a background check completed by Sedona Staffing Services, utilizing the background check service, backgroundchecks.com. Sedona Staffing Services did not utilize the Single Contact Repository or a combination of the Department of Public Safety and the Department of Human Services to obtain the background history of Staff K. The Program failed to ensure the staffing agency utilized the appropriate background check service.</p> <p>On 7/29/21 at 2:30 pm, the Interim Director and the Care Services Manager confirmed the above finding.</p>	A 410	<p>On 10/28/21, RDCS provided re-education to Executive Director on required background check using SING or if SING is not used, a criminal history check from the department of public safety and a check of the child and dependent adult abuse registries from the department of human services be completed for staff, including agency staff prior to providing services at the community.</p> <p>The ED and/or designee will audit newly hired staff, including agency staff, personnel record to ensure required bac ground check has been completed prior to providing services at the community weekly for four weeks, biweekly for four weeks, then monthly for one month. Results of the audit will be discussed during monthly QI meetings. The QI Committee will determine if continued auditing is necessary based on three consecutive months of compliance.</p> <p>Completion date: 01/07/2022</p>	