

**Iowa Department of Inspections and Appeals  
Health Facilities Division  
Citation**

<b>FC#6295</b>				
<b>Rock Ridge Residential CC</b>  <b>400 Canton Street NW</b>  <b>Shellsburg, Iowa 52332</b>		Date: October 3, 2016  Survey Dates: August 23-30, 2016		
		Fine amount reduced by 35% to \$650 on October 13, 2016 pursuant to Iowa Code Section 135C.43A		
		<b>Class</b>	<b>Fine Amount</b>	<b>Correction date</b>
<b>135C.33 2.a 3</b>  <b>+</b>	<b>135C.33</b> Employees and certified nurse aide trainees-child or dependent adult abuse information and criminal record checks-evaluations to other providers-penalty. <b>2.a</b> If it is determined that a person being considered for employment in a facility has been convicted of a crime under a law of any state, the department of public safety shall notify the licensee that upon the request of the licensee the department of human services will perform an evaluation to determine whether the crime warrants prohibition of the person's employment in the facility. 3. In an evaluation, the department of human services shall consider the nature and seriousness of the crime or founded child or dependent adult abuse in relation to the position sought or held, the time elapsed since the commission of the crime or founded child or dependent adult abuse, the circumstances, under which the crime or founded child or dependent adult abuse was committed, the degree of rehabilitation, the likelihood that the person will commit the crime or founded child or dependent adult abuse again, and the number of crimes or founded child or dependent adult abuses committed by the person involved. If the department of human services performs an evaluation for the purposes of this section, the department of human services has final authority in determining whether prohibition of the person's employment is warranted.	II	\$500	Upon Receipt
<b>50.9(3)(5)</b>	<b>481-50.9(135C) Criminal, dependent adult abuse,</b>			

Facility Administrator \_\_\_\_\_

Date \_\_\_\_\_

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+	<p><b>and child abuse record checks.</b>  <b>50.9(3) Requirements for employer prior to employing an individual.</b> Prior to employment of a person in a facility, the facility shall request that the department of public safety perform a criminal history check and the department of human services perform child and dependent adult abuse record checks of the person in this state?  <b>50.9(5) Employment prohibition.</b> A person who has committed a crime or has a record of founded child or dependent adult abuse shall not be employed in a facility unless an evaluation has been performed by the department of human services (I, II, III).</p> <p><b>58.11(3) 481-58.11(135C) Personnel.</b>  <b>58.11(3) Employee criminal record checks, child abuse checks and dependent adult abuse checks and employment of individuals who have committed a crime or have a founded abuse.</b> The facility shall comply with the requirements found in Iowa Code section 135C.33 as amended by 2013 Iowa Acts, Senate File 347, and rule 481-50.9(135C) related to completion of criminal record checks, child abuse checks, and dependent adult abuse checks and to employment of individuals who have committed a crime or have a founded abuse. (I, II, III).</p> <p><b>DESCRIPTION:</b></p> <p>Based on staff interview and review of personnel records, the facility failed to request an evaluation by the Department of Human Services, and obtain approval before hiring Staff B.</p>			

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	<p>Findings include:</p> <p>Record review on 8/23/16 of the employee personnel files, revealed Staff B had a date of hire as 10/9/15. A criminal history check was returned to the facility from the Iowa Division of Criminal Investigation on 9/30/15 revealing further research required. No follow-up from this report could be located in Staff B's file. A second criminal history check was returned to the facility from the Iowa Division of Criminal Investigation identifying a criminal record on 7/15/16. The facility did not send a request to the Department of Human Services for approval to hire or for Staff B to continue to work. The Administrator confirmed the above finding on 8/23/16 at 1 PM.</p> <p><b>FACILITY RESPONSE:</b></p>			

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<b>235E.2 3a</b>	<b>235E.2 Dependent adult abuse reports in facilities and programs.</b>	<b>II</b>	<b>\$500</b>	<b>Upon Receipt</b>
<b>+</b>	<p><b>3. a.</b> If a staff member or employee is required to make a report pursuant to this section, the staff member or employee shall immediately notify the person in charge or the person's designated agent who shall then notify the department within twenty-four hours of such notification. If the person in charge is the alleged dependent adult abuser, the staff member shall directly report the abuse to the department within twenty-four hours.</p>			
<b>52.2(2)a</b>	<p><b>481-52.2(235E) Persons who must report dependent adult abuse and the reporting procedure for those persons.</b></p> <p><b>52.2(2)</b> Reporting suspected dependent adult abuse in facilities or programs.</p> <p><b>a.</b> If a staff member or employee is required to make a report pursuant to this rule, the staff member or employee shall immediately notify the person in charge or the person's designated agent who shall then notify the department within 24 hours of such notification or the next business day.</p> <p><b>DESCRIPTION:</b></p> <p>Based on staff interviews and record review, the facility failed to report an alleged dependent adult abuse to the Department of Inspections and Appeals within 24 hours or the next business day.</p> <p>Findings follow:</p> <p>Record review on 8/23/16 indicated the MAR</p>			

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	<p>(Medication Administration record) for Residents #3, #4 and #7 were found to have gaps leading to the possibility of missing medications. Resident #3 was missing 2 milliliters (ml) of liquid Lorazepam (antianxiety medication) on 1/13/16. Staff A conducted the last count of the liquid Lorazepam as identified on the narcotic count record. The MAR identified Resident #4 missed 1 tablet of Lorazepam on 3/23/16 according to Staff A's documentation on the narcotic count record. Resident #7 missed 2 tablets of Tramadol between 3/24/16 and 4/5/16, according to Staff A's documentation.</p> <p>On 8/24/16 at 1:36 p.m., the Administrator was interviewed. The Administrator stated during the months of March and April 2016, she monitored Staff A for incorrect medication management. The Administrator stated on 4/12/16, she placed Staff A on administrative leave for not following medication administration/nursing policies. According to the Administrator on Staff A's second night back to work after the administrative leave, two Lorazepam tablets were unaccounted for. The Administrator stated Staff A was terminated on 4/19/16 for repeatedly not following facility policies regarding medication administration. The facility was unable to find sufficient evidence to demonstrate dependent adult abuse.</p> <p>According to Department records, in July a surveyor was on site surveying a separately licensed program at the building and discovered the medication discrepancies and in-house investigation completed in March/April of 2016. The</p>			

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	<p>surveyor gave the Administrator a recommendation to report her suspicions and concerns to the Department as a number of the residents involved were living under the Residential Care Facility licensed side of the building. The Administrator contacted the Department and an investigation ensued.</p> <p>On 8/23/16 at 1 PM, the Administrator confirmed the facility did not contact the Department within 24 hours of their suspicions of dependent adult abuse by Staff A.</p> <p><b>FACILITY RESPONSE:</b></p>			

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