Iowa Department of Inspections and Appeals Health Facilities Division Citation

Citation Number: 6756				Date: Februa	ry 14, 2018
Facility Name: Sunset Knoll Care And Rehab Center Facility Address/City/State/Zip 401 West Fifth Street			Survey I January	Dates: 17, 2018 to Febr	uary 6, 2018
Aurelia, IA. 51005		HL			
Rule or Code Section	Natur	e of Violation	Class	Fine Amount	Correction date

the department of human services. (I, II, III)

Page 1 of 3

Facility Administrator

Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (2015).

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Section					

DESCRIPTION: Based on record review, facility policy, and staff interview, the facility failed to obtain criminal and abuse background checks prior to hiring 1 of 7 employees (Staff A). The facility reported a census of 18 residents.	
Findings include:	
The 4/1/17 revised Abuse Prevention, Identification, Investigation and Reporting Policy revealed the facility will screen potential employees by conducting an Iowa criminal record check and dependent adult abuse registry check on all prospective employees prior to hire.	
The New Employee (Change) Worksheet documented the facility hired Staff A, Registered Nurse on 9/1/17.	
The Single Contact License and Background Check identified the facility obtained a criminal and abuse background checks on Staff A on 1/18/18. Staff A's background checks were cleared when completed 4 months and 17 days after hire.	
When interviewed on 2/1/18 at 9:00 a.m. the Office Manager stated she forgot to run a background check on Staff A. The Office Manager reported the facility hired Staff A on 9/1/17, and she is still employed at the facility.	
On 2/1/18 at 12:30 p.m. the Office Manager reported	

Page 2 of 3

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she obtained Staff A's background check on 1/18/18, after the surveyor requested to review Staff A's employee file. FACILITY RESPONSE:		

Page 3 of 3

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