

TERRY E. BRANSTAD
GOVERNOR

RODNEY A. ROBERTS, DIRECTOR

KIM REYNOLDS
LT. GOVERNOR

December 29, 2014

Ms. Jody Thomas, RN
Melrose Meadows Retirement Community
350 Dublin Drive
Iowa City, IA 52246**RE: Final Recertification Monitoring Evaluation Report – Melrose Meadows Retirement Community, Iowa City, IA**

Dear Ms. Thomas:

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, following a survey by DIA on **December 17, 2014**. The Report notes a Regulatory Insufficiency in the area(s) of: Record Checks.

Each Regulatory Insufficiency requires that the Program submit a written Plan of Correction (POC).

In preparing the POC, please use the tenant identifiers from the Report, i.e. Tenant #1, when reference is made to specific tenants. If your response includes a specific tenant's assessment or service plan, it is the Program's responsibility to conceal the tenant's name in order to maintain the tenant's anonymity. Your response shall include the following:

1. Elements detailing how the Program will correct each regulatory insufficiency.
2. What measures will be taken to ensure the problem does not recur.
3. How the Program plans to monitor performance to ensure compliance.
4. The date by which the regulatory insufficiency will be corrected.

Please note that all regulatory insufficiencies must be **corrected within 30 days of the date of the exit conference**; however, there may be situations where the timeframe may be shortened or lengthened, at the discretion of the department.

The POC must be submitted/emailed to DIA to my attention within ten (10) working days of receipt of this letter. It may be necessary for DIA to revisit the Program to confirm progress in fulfilling the POC's corrective measures.

As provided by IAC rule 481-67.14, you are afforded one opportunity to refute cited regulatory insufficiencies through the informal conference process. A request for an informal conference must be made within 20 working days of the notice or service of this letter and the final report. Please refer to rule 67.14 for more information.

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.

Also enclosed you will find the Assisted Living Program Certificate **S0159** with effective dates of **October 23, 2014** through **October 22, 2016**.

If you have any questions in regard to this report, please contact me at 515/281-7039 or **Rose.Boccella@dia.iowa.gov**

Sincerely,

Rose Boccella

Rose Boccella
Program Coordinator
Adult Services Bureau

Enclosure

DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: S0159	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 12/17/2014
NAME OF PROVIDER OR SUPPLIER MELROSE MEADOWS RETIREMENT COMM		STREET ADDRESS, CITY, STATE, ZIP CODE 350 DUBLIN DRIVE IOWA CITY, IA 52246		
(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	481-67 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. General Population Program Number of tenants without cognitive disorder: 23 Number of tenants with cognitive disorder: 0 Total Population of Program at time of on-site: 23 TOTAL census of Assisted Living Program: 23	A 000		
A 128	481-67.19(8)a, b Record Checks 481-67.19(135C,231B,231C,231D) Criminal, dependent adult abuse, and child abuse record checks. 67.19(8) Change of employment-person with criminal or abuse record-exception to record check evaluation requirements. A person with a criminal or abuse record who is or was employed by a certified program and is hired by another certified program shall be subject to the background check. a. A reevaluation of the latest record check is not required, and the person may commence employment with the other certified program if the following requirements are met: (1) The department of human services previously performed an evaluation concerning the person ' s criminal or abuse record and concluded the record did not warrant prohibition of the person ' s employment; (2) The latest background check does not indicate a crime was committed or founded abuse record was entered subsequent to the	A 128		

DIVISION OF HEALTH FACILITIES - STATE OF IOWA

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

**350 DUBLIN DRIVE
IOWA CITY, IA 52246**

(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 128	Continued From page 1 prior evaluation; (3) The position with the subsequent employer is substantially the same or has the same job responsibilities as the position for which the previous evaluation was performed; (4) Any restrictions placed on the person ' s employment in the previous evaluation by the department of human services and still applicable shall remain applicable in the person ' s subsequent employment; and (5) The person subject to the background check has maintained a copy of the previous evaluation and provided it to the subsequent employer, or the previous employer provides the previous evaluation from the person ' s personnel file pursuant to the person ' s authorization. If a physical copy of the previous evaluation is not provided to the subsequent employer, a current record check evaluation shall be performed. b. For purposes of this subrule, a position is " substantially the same or has the same job responsibilities " if the position requires the same certification, licensure, or advanced training. For example, a licensed nurse has substantially the same or the same job responsibilities as a director of nursing; a certified nurse aide does not have substantially the same or the same job responsibilities as a licensed nurse. This REQUIREMENT is not met as evidenced by: Based on review of a staff file, a timecard record,	A 128		

DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: S0159	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 12/17/2014
---	---	--	--

NAME OF PROVIDER OR SUPPLIER MELROSE MEADOWS RETIREMENT COMM	STREET ADDRESS, CITY, STATE, ZIP CODE 350 DUBLIN DRIVE IOWA CITY, IA 52246
--	--

(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 128	Continued From page 2 Program records and a staff interview the Program failed to complete a current record check evaluation for a staff who had a criminal record, was previously employed by another certified program and was hired the Program without a physical copy of the previous evaluation for one of five staff files reviewed (Staff A). One staff who had a criminal record had previously worked at another certified program and was hired by the Program without a physical copy of the previous evaluation provided or without a current evaluation completed prior to employment. 1. Staff A, was a tenant assistant (TA) and was hired on 8-24-14. A criminal history background check and abuse registries check was completed on 8-19-14 and revealed further research was required for the criminal history background check. The Iowa Record Check Request Form S dated 8-21-14 indicated there was a record found. The Record Check Evaluation form indicated the evaluation determination was Staff A could work at the Program. The approval notice was dated 9-4-14. The determination of the record check evaluation was not completed prior to Staff's A hire date. 2. Staff A's Employee Timecard Report indicated Staff A received paid wages on 8-24-14 prior to the evaluation determination and approval of Staff A to work at the Program. 3. Staff A's employment application was provided. The application indicated Staff A was previously employed by another certified program. Staff A was hired at the Program as a TA and held a similar position at the previous employer which was a certified program.	A 128		

DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: S0159	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 12/17/2014
---	---	--	--

NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

MELROSE MEADOWS RETIREMENT COMM

**350 DUBLIN DRIVE
IOWA CITY, IA 52246**

(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 128	Continued From page 3 4. The Program's Staffing policy indicated a prospective employee of the Program should have a criminal history check, dependent adult abuse and child abuse checks completed before the prospective employee began work. If a prospective employee had a criminal history or an abuse history the prospective employee should not be employed by the Program unless the Department of Human Services had performed an evaluation and determined the record did not warrant the employment prohibition. Proof of the pre-employment background check should be maintained in the employee's file. 5. According to an interview with the Executive Director on 12-17-14 at 3:55 p.m., Staff A told the Executive Director there would be a hit on the background check and it also occurred with the previous healthcare employers. Staff A told the Executive Director Staff A would have to write what happened and Staff A had been approved to work at another certified program and also at a hospital. Staff A told the Executive Director it would come back fine and it would say Staff A could work. Staff A verbally told the Executive Director and there was no paperwork provided by Staff A. The Executive Director said Staff A held the same position at the Program as Staff A held at the previous employer. The Executive Director did not receive the record check evaluation from Staff A's previous employer which was a certified program. The Executive Director said she thought the 60 day rule regarding background checks applied to the background check for Staff A.	A 128		

Melrose Meadows Assisted Living Community
Jody Thomas, RN Executive Director
350 Dublin Drive
Iowa City, IA 52246
(319) 341-7893

Date of Monitoring Visit: December 17, 2014

Date of Monitoring Evaluation Report: December 30, 2014

PLAN OF CORRECTION
(Submitted December 30, 2014)

A 128 481-67.19(8)a, b Record Checks

67.19 (5) The person subject to the background check has maintained a copy of the previous evaluation and provided it to the subsequent employer, or the previous employer provides the previous evaluation from the person's personnel file pursuant to the person's authorization. If a physical copy of the previous evaluation is not provided to the subsequent employer, a current record check evaluation shall be performed.

Staff A did not maintain a copy of the previous evaluation and did not provide it to the Director during the interview process. The Director did not ask for a copy of the previous evaluation. The Director did peruse the background check by having the potential employee complete the required paperwork to send to DHS however the Director failed to wait until DHS cleared the potential employee to work.

Plan of Correction: The Assistant Manager will complete all prospective employee background checks. The Director will review all background checks to determine eligibility for employment with the Department of Human Services. The Director will follow the company policy as follows: "A prospective employee of Melrose Meadows will have a criminal history check, dependent adult abuse and child abuse check completed before the applicant can begin work". Effective immediately the Director will not allow the applicant to begin work until the Department of Human Services has cleared the applicant of all criminal and abuse checks and deemed them appropriate for Assisted Living employment therefore ensuring there will be no future rule violations with regard to background checks. At that time the applicant may be employed and begin work. The background check will continue to be kept in the employee's file. This plan of correction will be effective today December 30, 2014.

MELROSE MEADOWS
A RETIREMENT COMMUNITY

Elegant Retirement Living

December 30, 2014

Rose Bocella
Program Coordinator
Adult Services Bureau
Lucas State Office Building
321 East 12th Street
Des Moines, IA 50319-0083

RE: Re-certification Monitoring Plan of Correction for Melrose Meadows Retirement Community.

Date of Monitoring Visit: December 17, 2014

Date Monitor's report received at Melrose Meadows: December 29, 2014

Dear Ms. Bocella,

I have received the Final Recertification Monitoring Report. Although I disagree with the outcome of the background check I am not going to further dispute it as I don't think it's a "winnable" situation. I do however, think the current regulations regarding background checks need to be reconsidered and potential employees should not have to continue to explain a mistake they made in their early lives for the rest of their life especially once DHS have cleared them to work in healthcare settings. I feel we are wasting our time as well as DHS by having to review the same offense over and over when there haven't been any new offenses since the one initially committed. I respect the Monitor's comments and will definitely not make the same mistake going forward.

Enclosed please find our Plan of Correction for your consideration. If you have any additional questions please feel free to contact me at (319)-248-2885 or by e-mail at jthomas@melrosemeadows.com. Thank you.

Sincerely,



Jody Thomas, RN
Executive Director

350 Dublin Drive • Iowa City, Iowa 52246 • Phone 319/341-7893 • Fax 319/248-1183 • www.newburyliving.com

Independent and Certified Assisted Living Apartments