DEPARTMENT OF INSPECTIONS AND APPEALS

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	S0307	A. BUILDING: _____ B. WING _____	C 12/14/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WHISPERING CREEK	**2607 NICKLAUS BLVD SIOUX CITY, IA 51106**

(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 for People with Dementia are defined by the population served. The census numbers were provided by the Program at the time of the on-site. General Population Number of tenants without cognitive disorder: 41 Number of tenants with cognitive disorder: 4 Memory Care Unit Number of tenants without cognitive disorder: 0 Number of tenants with cognitive disorder: 14 TOTAL Census of Assisted Living Program for People with Dementia: 59 No regulatory insufficiencies were cited during the Investigation of Incident #72660-I. The following regulatory insufficiencies were cited during the recertification visit conducted to determine compliance with certification for an Assisted Living Program for People with Dementia.	A 000		
A 125	481-67.19(5) Record Checks 481-67.19(135C,231B,231C,231D) Criminal, dependent adult abuse, and child abuse record checks. 67.19(5) Employment prohibition. A person who has committed a crime or has a record of founded child or dependent adult abuse shall not be employed in a program unless an evaluation has been performed by the department of human services.	A 125		

DIVISION OF HEALTH FACILITIES - STATE OF IOWA
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

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A 125	Continued From page 1 This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program failed to obtain a Department of Human Services (DHS) evaluation prior to employment for 1 of 1 staff reviewed with a record of child abuse (Staff A). Findings follow: Review of Staff A's file revealed a hire date of 1-8-17. The Single Contact License and Background Check (SING) was completed 12-21-16. The SING documented the facility was to initiate a record check evaluation with DHS regarding child abuse. The DHS Record Check Evaluation form revealed Staff A was approved to work on 2-2-17. The evaluation was not completed prior to employment. When interviewed on 12-13-17 at 2:32 p.m. the Executive Director confirmed this finding. She stated she thought she was able to hire someone pending evaluation and did not realize child abuse did not meet the criteria listed in rule 67.19(3)e.	A 125		