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
	S0243	A. BUILDING: _____ B. WING _____	R-C 05/20/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ADDINGTON PLACE OF CLINTON	1701 13TH AVENUE NORTH CLINTON, IA 52732

(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. Number of tenants without cognitive impairment: 44 Number of tenants with cognitive impairment: 20 Total census: 64 The following regulatory insufficiency was recited related to the revisit of FC 10694 completed on 11/4/24.	A 000	See attached POC 6/22/25	
A 435	481-67.19(5) 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. This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program failed to ensure evaluations were completed by the Department of Health and Human Services (HHS) for staff with a criminal history prior to employment. This pertained to 2 of 2 staff reviewed with background checks that required further action (Staff A and C). Findings follow: 1. Review of Staff A's file on 5/20/25 revealed a hire date of 4/29/25. A Single Contact License & Background Check (SING) was completed on 4/28/25. It indicated further research was required	A 435		

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

DEPARTMENT OF INSPECTIONS AND APPEALS

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A 435	Continued From page 1	A 435		

for the criminal history background check. The Iowa Criminal History Record Check Request Sing Form S indicated a criminal history record was found dated 4/30/25. An evaluation was not completed by HHS that indicated Staff A could be employed by the Program.

2. Review of Staff C's file on 5/20/25 revealed a hire date of 4/3/25. A SING was completed on 3/27/25. It indicated further research was required for the criminal history background check. An Iowa Criminal History Record Check Request Sing Form S indicated a criminal history record was found dated 4/1/25. The criminal history record information indicated Staff C had a charge that, with all criteria met in the regulations, indicated she could be employed for 60 days if an evaluation had been requested; however, an evaluation had not yet been requested. The 60 days was set to expire on 6/3/25.

3. When interviewed on 5/20/25 at 11:44 a.m. the BOM said she was told only those with a hit on the abuse registry needed to be evaluated. She confirmed an evaluation was not completed for Staff A. She confirmed there was not a pending or completed evaluation for Staff C.

When interviewed on 5/20/25 at 11:57 a.m. the Executive Director said he thought evaluations needed to be completed related to abuse (registry) and not criminal history. He said he was not sure if an evaluation was pending for Staff C but if it was not pending, it would be started today. He confirmed there was no evaluation completed for Staff A.

ok
7/1/25

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	PROVIDER/SUPPLIER/CLIA INDENTIFICATION NUMBER: S0243	DATE SURVEY COMPLETED: 5/20/2025

ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENTCIES (EACH DEFICIENCY SHOULD BE PRECEDE BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERRED TO THE APPROPRIATE DEFICIENCY	Identify what changes to the provider's systems and practices were made to ensure compliance with the specific statute(s). Include information about how the provider will maintain compliance in the future.	COMPLETION DATE
Tag #1	**481-67.19(5) 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. This REQUIREMENT is not met as evidenced by: Based on interview and record review the Program failed to ensure evaluations were completed by the Department of Health and Human Services (HHS) for staff with a criminal history prior to employment. This pertained to 2 of 2 staff reviewed with background checks that required further action (Staff A and C). Findings follow: 1. Review of Staff A's file on 5/20/25 revealed a hire date of 4/29/25. A Single Contact License & Background Check (SING) was completed on 4/28/25. It indicated further research was required for the criminal history background check. The Iowa Criminal History Record Check Request Sing Form S indicated a criminal history record was found dated 4/30/25. An evaluation was not completed by HHS that indicated Staff A could be employed by the Program.	**A435**	**What initial correction was made?** On 5/20/25, before survey completed, a Record Check Evaluation on Staff A was sent in and she was approved by HHS on 5/21/25. Staff C's Record Check Evaluation was sent on 5/21/25 and approved by HHS on 5/22/25.	**How will we ensure and maintain compliance going forward?** Three designated employees, which will include the Director or Designee, will conduct a triple check on all background checks of new employees. The Director or Designee will then audit new employee files and insure that all requirements are met before the employees are allowed to start employment/start working.	**Implementation Date:** 6/22/2025 Completion Date: On going Responsible Party: Director or designee

	Continued From page 1 2. Review of Staff C's file on 5/20/25 revealed a hire date of 4/3/25. A SING was completed on 3/27/25. It indicated further research was required for the criminal history background check. An Iowa Criminal History Record Check Request Sing Form S indicated a criminal history record was found dated 4/1/25. The criminal history record information indicated Staff C had a charge that, with all criteria met in the regulations, indicated she could be employed for 60 days if an evaluation had been requested; however, an evaluation had not yet been requested. The 60 days was set to expire on 6/3/25. 3. When interviewed on 5/20/25 at 11:44 a.m. the BOM said she was told only those with a hit on the abuse registry needed to be evaluated. She confirmed an evaluation was not completed for Staff A. She confirmed there was not a pending or completed evaluation for Staff C. When inter-viewed on 5/20/25 at 11:57 a.m. the Executive Director said he thought evaluations needed to be completed related to abuse (registry) and not criminal history. He said he was not sure if an evaluation was pending for Staff C but if it was not pending, it would be started today. He confirmed there was no evaluation completed for Staff A.				

Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of regulatory insufficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of state law.

Compliance Date: 06/22/2025