

**481—50.10(135C) Inspections, exit interviews, plans of correction, and revisits.**

**50.10(1) *Frequency of inspection.*** The department shall inspect a licensed health care facility at least once within a 30-month period. Facilities participating in the Medicare or Medicaid programs may be inspected more frequently as a part of a joint state and federal inspection.

**50.10(2) *Accessibility of records, the facility, and persons.*** An inspector of the department may enter any licensed health care facility without a warrant and may examine all records pertaining to the care provided to residents of the facility. An inspector of the department may contact or interview any resident, employee, or any other person who might have knowledge about the operation of a health care facility. The inspector may duplicate records and take photographs as part of the inspection.

**50.10(3) *Exit interviews.*** The health care facility shall be provided an exit interview at the conclusion of an inspection, and the facility representative shall be informed of all issues and areas of concern related to the deficiencies.

*a. Methods of conducting exit interview.* The department may conduct the exit interview either in person or by telephone.

*b. Second exit interviews.* The department shall conduct a second exit interview if any additional areas of concern are identified.

**50.10(4) *Submission of additional or rebuttal information.*** The facility shall be provided two working days from the date of the exit interview to submit additional or rebuttal information to the department.

*a. Receipt of additional information.* Additional or rebuttal information must be received by the department within two working days in order to be considered.

*b. Methods to submit additional information.* The additional or rebuttal information may be submitted via email, facsimile, or overnight courier to the department.

*c. Inform of the opportunity to submit additional or rebuttal information.* During the inspection, the facility shall be informed of the opportunity to submit additional or rebuttal information and of the contact information for the department.

**50.10(5) *Standards for determining whether a deficiency exists.*** The department shall use a preponderance of the evidence standard when determining whether a regulatory deficiency exists. For purposes of this rule and rule 481—50.11(135C), “preponderance of the evidence standard” means that the evidence, considered and compared with the evidence opposed to it, produces the belief in a reasonable mind that the allegations or deficiency is more likely true than not true. This standard does not require that the inspector personally witnessed the alleged violation.

**50.10(6) *Statement of deficiencies.*** When one or more deficiencies are found, a statement of deficiencies detailing each deficiency shall be sent by the department to the health care facility within ten working days of the exit interview.

**50.10(7) *Plan of correction.*** Within ten calendar days following receipt of the statement of deficiencies, the health care facility shall submit a plan of correction to the department.

*a. Contents of plan.* The plan of correction shall contain the following information:

(1) How the facility will correct the deficient practice;

(2) How the facility will act to protect residents;

(3) The measures the facility will take or the systems it will alter to ensure that the problem does not recur;

(4) How the facility plans to monitor its performance to make sure that solutions are sustained; and

(5) Date(s) when corrective action will be completed.

*b. Review of plan.* The department shall review the plan of correction within ten working days of receipt. The department may request additional information or revisions to the plan, which shall be provided as requested.

**50.10(8) *Revisits.*** If a facility licensed under this chapter is subject to or will be subject to denial of payment including payment for Medicare or medical assistance (Medicaid) under Iowa Code chapter 249A, or denial of payment for all new admissions pursuant to 42 CFR Section 488.417, and submits a plan of correction relating to the deficiencies or a response to a citation issued under 481—Chapter 56 and the department elects to conduct an on-site revisit inspection, the department shall commence the

revisit inspection within the shortest time feasible of the date that the plan of correction is received or the date specified within the plan of correction alleging compliance, whichever is later.

**50.10(9)** *Appeals of statement of deficiencies.* The facility may appeal the statement of deficiencies by filing an appeal request with the department within 20 working days after receipt of the statement of deficiencies. The procedures defined in rule 481—50.6(10A) shall be followed for the appeal.

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