

Kim Reynolds, Governor

Adam Gregg, Lt. Governor

Kelly Garcia, Interim Director

RETURN RECEIPT E-MAIL TRANSMISSION TO: jenockson@rosecrance.org

October 10, 2022

Julie Enockson, CEO Jackson Recovery Centers dba Rosecrance Jackson Centers 800 5th Street, Suite 200 Sioux City, Iowa 51101

Dear Ms. Enockson:

This office has received the final documentation from the 2020 The Joint Commission accreditation survey. This completes your current application, which was initially submitted on May 12, 2020. Your deemed status application is now complete.

Jackson Recovery Centers dba Rosecrance Jackson Centers will be placed on the agenda for the October 12, 2022 meeting of the Iowa Board of Health Substance Abuse/Problem Gambling Program Licensure Committee. *Program representation is welcomed but not required*. Please let me know if you would like to participate in this meeting and a phone number will be provided to you.

The effective dates of the license shall be for the same period of time as that for which your program is accredited, from August 31, 2020 to August 17, 2022. Your current license, which expired August 31, 2020, remains valid until final action is taken by the Substance Abuse/Problem Gambling Program Licensure Committee on this application, per Iowa Code Chapter 17A.18.

Jackson Recovery Centers dba Rosecrance Jackson Centers will be licensed to provide Adult Levels 1, 2.1, 2.5, 3.1, 3.3, 3.5, 3.7, and Juvenile Levels 1, 2.1, 2.5, 3.5, and 3.7 Enhanced Substance Use Disorder Treatment and Problem Gambling Treatment Services.

If you have questions, please contact me at Lori.Hancock-Muck@idph.iowa.gov or (515) 204-9766.

Sincerely,

Jon Harreack Muck,

Lori Hancock-Muck Health Facilities Officer Bureau of Substance Abuse

JUSTIFICATION OF VARIANCE

The program was found to be in noncompliance with the following licensure requirement.

166.21(6) Data Reporting*

Data reporting was in noncompliance because the program has not reported the required data to the division in accordance with department requirements and processes.

*Technical assistance was provided via email. Licensee was provided specific technical assistance on the following area of noncompliance:

• Licensee has reported regularly on client treatment episodes but service events have not been reported since January 2022. A written corrective action plan is required to bring data reporting into compliance. The corrective action plan shall include corrective measures to be taken by the program to ensure immediate adherence with data reporting requirements along with a completion date. If the licensee should foresee any further delays with reporting, notification of delays shall be communicated to <u>SAPGData@idph.iowa.gov</u>.