

**RETURN RECEIPT**

**E-MAIL TRANSMISSION TO:** [Lhagg@mercyare.org](mailto:Lhagg@mercyare.org)

June 22, 2022

Lori Hagg, Clinical Supervisor  
*Sedlacek Treatment Center*  
5975 Rockwell Drive NE  
Cedar Rapids, Iowa 52402

Dear Ms. Hagg:

This office has received The Joint Commission accreditation survey report and other required deemed status application materials. Your deemed status application is now complete. Thank you for the final documentation. Sedlacek Treatment Center will be placed on the agenda for the July 13, 2022 meeting of the Iowa Board of Health Substance Abuse/Problem Gambling Program Licensure Committee. ***Program representation is welcomed but not required.*** The effective dates for your license will be November 30, 2021 to November 30, 2024.

We have enclosed a justification of variance due to an area of non-compliance found with data reporting. A corrective action plan is not required until 30 days following the Committee's decision to take action.

*Sedlacek Treatment Center* will be licensed to provide Adult and Juvenile Levels 1 and 2.1 Substance Use Disorder Treatment Services.

Your current license, which expired November 30, 2021, 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.

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

Sincerely,



Lori Hancock-Muck  
Health Facilities Officer  
Division of Behavioral Health

Sedlacek Treatment Center  
5975 Rockwell Drive NE  
Cedar Rapids, Iowa 52402

## JUSTIFICATION OF VARIANCE

The program was found to be in non-compliance with the following licensure requirement:

### **155.21(6) Data Reporting\***

Data reporting was in non-compliance 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 non-compliance:

- Licensee has entered one treatment episode for July 2021 and no further data has been reported to IBHRS (state data reporting system) from July 2021 – current. 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 [SAPGData@idph.iowa.gov](mailto:SAPGData@idph.iowa.gov).