

**Iowa Department of Inspections and Appeals
Health Facilities Division
Citation**

FC#6323				Date: October 26, 2016
Village Northwest Unlimited		Fine amount reduced by 35% to \$650.00 on November 8, 2016 pursuant to Iowa Code Section 135C.43A		Survey Dates: September 27-28, 2016
330 Village Circle				
Sheldon, Iowa 51201		Ds/cc/lk		
		Class	Fine Amount	Correction date
64.60	<p>481—64.60 (135C) Federal regulations adopted—conditions of participation. Regulations in 42 CFR Part 483, Subpart D, Sections 410 to 480 effective October 3, 1988, are adopted by reference and incorporated as part of these rules. A copy of these regulations is available on request from the Health Facilities Division, Department of Inspections and Appeals, Lucas State Office Building, Des Moines, Iowa 50319.</p> <p>Classification of violations is I, II, and III, determined by the division using the provisions in 481—Chapter 56, “Fining and Citations,” to enforce a fine to cite a facility.</p> <p>This rule is intended to implement Iowa Code section 135C.2 (3).</p>	II	\$500	Upon Receipt
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235E.2 3a	<p>235E.2 Dependent adult abuse reports in facilities and programs.</p> <p>3. a. If a staff member or employee is required to make a report pursuant to this section, the staff member or employee shall immediately notify the person in charge or the person’s designated agent who shall then notify the department within twenty-four hours of such notification. If the person in charge is the alleged dependent adult abuser, the staff member shall directly report the abuse to the department within twenty-four hours.</p>			
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52.2(2)a	<p>481-52.2(235E) Persons who must report dependent adult abuse and the reporting procedure for those persons.</p> <p>52.2(2) Reporting suspected dependent adult abuse</p>			

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+ 64.33(1) W153	<p>in facilities or programs. a. If a staff member or employee is required to make a report pursuant to this rule, the staff member or employee shall immediately notify the person in charge or the person's designated agent who shall then notify the department within 24 hours of such notification or the next business day.</p> <p>481-64.33(1)-Allegations of dependent adult abuse. 64.33(1) <i>Allegations of dependent adult abuse.</i> Allegations of dependent adult abuse shall be reported and investigated pursuant to Iowa Code chapter 235E and 481-Chapter 52. (I,II,III)</p> <p>483.420(d)(2) The facility must ensure that all allegations of mistreatment, neglect or abuse, as well as injuries of unknown source, are reported immediately to the administrator or to other officials in accordance with State law through established procedures.</p> <p>DESCRIPTION:</p> <p>Based on staff interviews and record review, the facility failed to ensure allegations of client mistreatment, neglect, and/or abuse were reported to the administrator and to the Iowa Department of Inspections and Appeals (Client#1). As a result, the allegation was not immediately (within 24 hours or next business day) reported to the Department of Inspections and Appeals (DIA). Finding follows:</p>			

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	<p>Record review on 9/27/16 identified a facility internal investigation, initiated 8/25/16 at 2:30 p.m. According to the document, Residential Advocate (RA) A reported being told by three staff the Residential Leader/Qualified Intellectual Disability Professional (RL/QIDP) slapped Client #1 on the face after he/she spit in the RL/QIDP's face on 8/24/16 but none of these staff witnessed the incident. The investigation identified Direct Support Professional (DSP) A and Community Skills Manager (CSM) A were present and witnessed the incident. The report noted the Director of ICF/ID and Program Services called CSM A who reported on 8/24/16, she witnessed the RL/QIDP slap Client #1 on the face after he/she spit in the RL/QIDP's face. The Director of ICF/ID and Program Services then contacted DSP A. DSP A reported Client #1 spit in the RL/QIDP's face and she responded by slapping him/her. DSP A said the RL/QIDP immediately commented she shouldn't have done that.</p> <p>When interviewed on 9/28/16 at 8:45 a.m., CSM A reported on 8/24/16, she worked at House 342 from 8:30 a.m. until 3:00 p.m. She stated around 2:15 p.m. or 2:30 p.m., Client #1 went outside carrying a binder and RL/QIDP went outside after him/her. She said she could see them from the window and Client #1 was visibly upset. CSM A stated she left the window and a few minutes later RL/QIDP and Client #1 returned inside to the dining room. She</p>			

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	<p>reported RL/QIDP stood in front of Client #1 telling him/her it was not okay for him/her to try to leave and attempted to take his/her binder. At this time, Client #1 said "mine" and spit in the RL/QIDP's face. CSM A stated the RL/QIDP "slapped (Client #1) across the face". CSM A reported Client #1 then attempted to grab and yelled at the RL/QIDP, as she walked away with the binder. CSM A stated Client #1 followed the RL/QIDP yelling "mine". Licensed Practical Nurse (LPN) A came into the facility and Client #1 went with her into her office. Client #1 was with LPN A when CSM A's shift ended and she left work. CSM A confirmed she did not immediately report the incident because she was still processing what she had observed. She planned to contact the Director of ICF/ID and Program Services on 8/25/16 but was called by the Director of ICF/ID first.</p> <p>When interviewed on 9/28/16 at 9:45 a.m., DSP A reported she worked from 2:00 p.m. until 10:00 p.m. at House 342. She stated at approximately 2:30 p.m., she walked to House 342 and observed Client #1 outside with another staff when RL/QIDP went to assist. DSP A reported observing the RL/QIDP pull Client #1's arm to get him/her back inside the house. Once inside, she stated Client #1 attempted to leave and RL/QIDP told him/her she was going to take his crayon box because of how he/she was acting and then the RL/QIDP grabbed it from</p>			

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	<p>him/her and put it in the nurse's office. DSP A stated Client #1 followed the RL/QIDP, yelling at her and calling her a "bad cop". DSP A reported the RL/QIDP pointed her finger and yelled at Client #1. Client #1 continued to yell at RL/QIDP and then spit in her face. DSP A reported the RL/QIDP immediately slapped him/her. DSP A stated Client #1 was caught off balance and his/her left cheek reddened. DSP A said the RL/QIDP turned to her and CSM A and stated "Sorry, I didn't mean to do that." DSP A said Client #1 continued to spit at RL/QIDP as she walked away. DSP A confirmed she did not report the incident immediately. She said she was unsure who to report the incident to since the RL/QIDP was her manager. DSP A stated she now knows to call the Director of ICF/ID and Program Services or Human Resources.</p> <p>Record review on 9/27/16 revealed the facility policy titled <u>Abuse and Neglect (not dated)</u>. The policy instructed any person who witnessed potential abuse was to report immediately (as soon as possible but not to exceed 24 hours after the incident) to both a supervisor and the Department of Inspections and Appeals.</p> <p>When interviewed on 9/27/16 at 2:30 p.m., the Director of ICF/ID and Program Services confirmed DSP A and CSM A failed to report the incident immediately, per facility policy. She confirmed the internal investigation was initiated on 8/25/16 and</p>			

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	<p>the allegation was not reported to the Department of Inspections and Appeals until 8/26/16, two days following the incident.</p> <p>FACILITY RESPONSE:</p>			

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64.33(2)	<p>481-64.33(135c) Allegations of dependent adult abuse. 64.33(2) Separation of accused abuser and victim. Upon a claim of dependent adult abuse of a resident being reported, the administrator of the facility shall separate the victim and accused abuser immediately and maintain the separation until the department's abuse investigation is completed and an abuse determination is made. (I,II) [ARC 1204C, IAB 12/11/13, effective 1/15/14]</p> <p>DESCRIPTION:</p> <p>Based on staff interviews and record review, the facility failed to ensure continuous separation between staff and a client, in accordance with Iowa Administrative Code Chapter 64.33(2), after an allegation of abuse was made.</p> <p>Record review on 9/27/16 revealed facility internal investigation initiated 8/25/16. The report documented on 8/24/16 Residential Leader/Qualified Intellectual Disability Professional (RL/QIDP) slapped Client #1 after he/she spit in her face. The document identified the incident was reported on 8/25/16 and the RL/QIDP was removed from having contact with Client #1 On 8/26/16. The RL/QIDP was placed on administrative leave pending the completion of the internal investigation.</p> <p>When interviewed on 9/27/16 at 7:15 p.m., the RL/QIDP confirmed she was placed on</p>	II	\$500	Upon Receipt

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	<p>administrative leave on 8/25/16. RL/QIDP stated she was allowed to return to work on 8/31/16 after she was given a discussion plan, she explained was a disciplinary action, with required follow-up trainings she was scheduled to take. She stated she worked the evening shift in House 342 and had contact with Client #1. She recalled she walked with him/her outside one or two times and had contact when she assisted during medication pass. The RL/QIDP said she went into work on 9/1/16 at 8:00 a.m. and was placed back on administrative leave around 12:00 p.m. after the direct care staff threatened to leave if she was allowed to return to work.</p> <p>Additional review on 9/28/16 of the internal investigation conclusion revealed the facility determined RL/QIDP slapped Client #1 in response to an adverse situation and she didn't intend to cause Client #1 any fear. The document noted RL/QIDP returned to work on 8/31/16, with a discussion plan in place. According to the report, RL/QIDP worked the evening shift on 8/31/16 in House 342 and the morning of 9/1/16 until she was placed back on administrative leave.</p> <p>Continued record review on 9/28/16 revealed an e-mail sent from RL/QIDP to the Director of ICF/ID and Program Services on 8/31/16. The e-mail provided the RL/QIDP's work schedule which noted</p>			

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	<p>she worked until 10:00 p.m. on 8/31/16 and was responsible for assisting clients during medication pass.</p> <p>When interviewed on 9/28/16 at 11:05 a.m., the Director of ICF/ID and Program Services confirmed the facility allowed the RL/QIDP to return to work on 8/31/16 and the RL/QIDP had contact with Client #1. She stated the facility determined the RL/QIDP had reacted to Client #1 and she had not intended to cause fear or intimidation. She confirmed the RL/QIDP was placed back on administrative leave on 9/1/16 due to staff threatening to leave if the RL/QIDP was allowed to stay at work.</p> <p>FACILITY RESPONSE:</p>			

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