Iowa Department of Inspections and Appeals
Health Facilities Division
Citation

FC#6433				**Date: 2/1/17**
Opportunity Living #1		**Survey Dates: 1/5/17, 1/11/17, 1/12/17**		
105 Westview				
Lake City, IA 51449	**JKM**			
		Class	**Fine Amount**	**Correction date**
64.60	**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 upon request from the Health Facilities Division, Department of Inspections and Appeals, Lucas State Office Building, Des Moines, Iowa 50319. 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. This rule is intended to implement Iowa Code section 135C.2(3).	**I**	**$5,000**	**Upon Receipt**
W 288	Techniques to manage inappropriate client behavior must never be used as a substitute for an active treatment program. **DESCRIPTION:** Based on interviews and record review, the facility failed to ensure staff implemented client Behavior Management Programs (BMPs) as written and/or to revise the program to incorporate all interventions staff were instructed to utilize. This affected 1 of 1 client (Client #1) involved in investigation #64945-I. Finding follows: Record review on 1/5/17 revealed facility internal investigation, initiated 12/30/16. The investigation noted Client #1 became upset and stated he/she was going to his/her bedroom to listen to music. Facility staff became aware Client #1 eloped out of his/her bedroom window after House Supervisor A called the facility and reported Client #1 was at her house, approximately 15 minutes			

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	after Client #1 went to his/her bedroom. The facility increased staff supervision of Client #1 to have a shadow staff with him/her at all times and also placed a board across the window. "Elopement" means a client with impaired decision-making leaves the facility without staff knowledge or permission. Client #1 - 36 years old and had diagnoses including, but not limited to: mild intellectual disability, seizure disorder, pervasive development disorder or Autism, obsessive compulsive disorder, and depression. Client #1 was admitted to the facility on 3/31/05. According to Weather Underground, weather conditions on 12/15/16 at 8:35 a.m. were approximately 1 degree Fahrenheit with no winds or precipitation. The weather conditions on 12/30/16 at 4:15 p.m. were 41 degrees Fahrenheit, wind speeds at approximately 14 miles per hour, and no precipitation. When interviewed on 1/5/17 at approximately 12:00 p.m., the Qualified Intellectual Disability Professional (QIDP) confirmed Client #1 had a history of attempting to elope and actual elopement. She was unable to recall the last actual elopement prior to 12/30/16. The QIDP said Client #1 consistently threatened to elope when he/she was upset, but rarely attempted to. She stated staff positioned themselves near exit doors if Client #1 threatened to leave to block him/her if needed. The QIDP reported the first time Client #1 attempted to elope through his/her bedroom window was on 12/15/16, but he/she was blocked by staff. She stated Client #1 continued to attempt to elope through the window so a board was			

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	secured across the window to prevent elopement and a staff was assigned to shadow Client #1 at all times through 12/18/16. She confirmed the board was removed after Client #1 returned from a home visit for Christmas, but could not recall the exact date. The QIDP confirmed on 12/30/16 a board was again placed across Client #1's bedroom window and a staff was assigned to shadow Client #1 after he/she successfully eloped from the facility. Record review revealed the following behavior reports for Client #1: a. The report, dated 12/15/16, documented Client #1 eloped from the home through his/her bedroom window at approximately 8:00 a.m. The report noted Client #1 exhibited target behaviors and was redirected to his/her room. Client #1 attempted to bust the screen out of his/her window. Staff redirected the client and remove him/her from the window and onto his/her bed. Staff stayed with Client #1 until he/she appeared calm. A few minutes after staff left Client #1's bedroom, he/she came out and staff told her he/she was not calm enough because he/she shook and redirected him/her back to his/her bedroom. After three minutes, staff checked Client #1 in his/her bedroom and discovered he/she eloped through the window. b. The report, dated 12/30/16, documented Client #1 eloped from the home at approximately 4:15 p.m.. The report noted Client #1 wanted his/her Kindle upon returning home. Staff informed the client he/she "lost it" for three hours. Client #1 then requested to call the			

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	QIDP, and was told he/she would need to wait until staff were available. Staff assisted other clients, when they received a phone call Client #1 was at another house. Staff notified on-call. The report noted Client #1 had stopped at another home and informed the homeowners he/she was homeless and had no where to go; the homeowners called police. Client #1 was picked up from another house and returned to his/her home. Record review on 1/5/16 revealed Client #1's Behavior Management Program (BMP) to decrease behavioral outbursts, signed by the QIDP 8/3/16. The BMP identified target behaviors, defined as: physical aggression (any action with the intention of causing physical harm to others such as: hitting, kicking, biting, or throwing objects), self-injurious behaviors (biting self, hitting self, punching walls, or any other behavior that could cause injury to self (slapping or hitting my leg does not count), vocal outbursts (screaming, use of profanity, name-calling, and verbal threats), property destruction (breaking own property or the property of others), and elopement (leaving a building, attempting to or threatening to, when upset with the intention of running away). Restrictive measures identified in the BMP included the use of behavior modifying medications, restricted access to his/her Kindle, a physical hold, a physical move, physical move with a transfer blanket or a wheelchair, separation, and time-out. The BMP instructed when Client #1 showed signs of stress, staff were to journal with him/her or ask what he/she could do when feeling stressed and offer suggestions. If Client #1 began to exhibit physical			

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	aggression, self-injurious behavior, vocal outbursts, or property destruction, the BMP instructed staff to suggest Client #1 go to his/her bedroom to calm down and then complete 10 minute visual checks of Client #1. If the behavior continued or Client #1 attempted to elope, staff were to use a physical move and place Client #1 in time-out. The BMP lacked further instruction on how to assist Client #1 when he/she exhibited elopement behaviors. Additional record review revealed Client #1's Staffing Conference Report/Annual Evaluation, conducted 7/26/16. According to the Living Unit Report, Client #1 attempted to elope by taking the screen off his/her bedroom window. The report noted the facility replaced the screen due to damage being caused when Client #1 attempted to climb out. The report included Client #1 was continuously monitored when he/she had a bad day to prevent elopement. The section of the report titled "Additional Information To Assist In Providing Necessary Supports" noted "(Client #1) has a long history of elopement. (He/She) completed programming for this several years ago, but the behavior returned. (Client #1) will leave the house when upset with the intention of running away, however (he/she) usually tells staff of (his/her) intentions, and, thus, needs additional supervision at these times. (He/She) has been discovered trying to climb out of (his/her) bedroom window..." When interviewed on 1/05/17 at approximately 1:30 p.m., the QIDP confirmed the BMP lacked specific interventions for staff to utilize when Client #1 exhibited elopement behaviors. She stated staff blocked exit doors			

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	to prevent elopement, but confirmed this was not included in Client #1's BMP. The QIDP discussed staff encouraged Client #1 to journal when showing signs of stress, but stated Client #1 refused to journal with anyone except her and they journaled following an incident. The QIDP confirmed Client #1's Annual Evaluation noted Client #1 had attempted to elope from his/her bedroom window, the screen had to be replaced on his/her window, and Client #1 needed additional supervision during these times, but failed to include interventions in the BMP to prevent elopement from his/her bedroom window. When interviewed on 1/5/16 at approximately 1:00 p.m., House Supervisor (HS) B stated on 12/15/16 Client #1 became upset and went to his/her room to calm. She stated once in his/her bedroom, Client #1 attempted to elope from his/her window but was blocked and redirected to sit on his/her bed and calm down. She said Client #1 sat on his/her bed and after a few minutes staff left his/her bedroom but immediately re-entered the room when they heard the window being opened. She stated staff again blocked Client #1 and after he/she calmed for a few minutes they left the room and closed the door. HS B reported within two to three minutes a check was completed and found Client #1 had eloped from his/her bedroom window. She said staff immediately went outside and found Client #1 running through the back yard of the facility. HS B stated she picked up Client #1 in her vehicle, brought him/her back into the facility, and Client #1 was placed in time-out. HS B said a shadow staff was then assigned to Client #1 and a board was secured across the bedroom window. HS B reported the			

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	Qualified Intellectual Disability Professional (QIDP) and Director of Programming Services (DPS) were informed of the elopement and both came into the facility. When interviewed on 1/11/17 at approximately 11:15 a.m., Therapeutic Technician (TT) A reported she was present on 12/15/16 when Client #1 eloped from his/her bedroom window. She stated Client #1 was upset and was redirected to his/her bedroom to calm. TT A stated once in his/her bedroom, Client #1 attempted to bust the screen out of the window and threatened to elope. Client #1 was redirected and a few minutes later all staff left his/her bedroom and closed the door. TT A stated a check was completed within a few minutes and it was discovered Client #1 eloped from his/her bedroom window. TT A stated footprints were observed in the snow outside Client #1's bedroom window and leading away from the facility. She reported staff went outside and found Client #1 running through the backyard. TT A stated Client #1 was brought back to the facility and placed in time-out. TT A stated she never witnessed Client #1 elope from his/her bedroom window prior to this incident, but had been informed Client #1 had a history of attempting to elope from the window. She stated when Client #1 threatened to elope, staff would position by exit door and block him/her if he/she attempted to elope. She reported she was verbally instructed to increase supervision of Client #1 if he/she threatened to showed signs of stress but reported Client #1 refused to journal with anyone except the QIDP. When interviewed on 1/11/17 at 11:35 a.m., Direct Support Professional (DSP) A reported staff were			

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	verbally instructed to have Client #1 go to his/her bedroom and monitor him/her closely after making threats to or attempting to elope. DSP A stated this was due to Client #1's history of attempting to elope from his/her bedroom window. She stated instead of completing 10 minute visual checks as instructed in the BMP, staff would stay with Client #1 to ensure constant monitoring until he/she was calm. After he/she calmed, DSP A stated staff would resume 15 minute checks of Client #1. DSP A stated she had never observed Client #1 journal with staff. When interviewed on 1/11/17 at 12:00 p.m., DSP B stated on 12/15/16 Client #1 became upset and was redirected to calm in his/her bedroom. DSP B reported once in the room, Client #1 locked the door. Staff entered the bedroom through an adjoining bathroom and found Client #1 attempting to elope from the window; staff blocked and redirected Client #1 to sit on his/her bed and calm. Staff also shut and locked the window. After a few minutes, staff left the bedroom and closed the door. DSP B reported staff stood outside the bedroom door. DSP B reported within a few minutes a check was completed and they found Client #1 had eloped from his/her bedroom window. DSP B said Client #1 was found running through the backyard of the facility. Staff assisted him/her back into the facility and Client #1 was placed in time-out. DSP B confirmed Client #1 had a long history of attempting to elope. She said Client #1 threatened to leave, but normally would attempt to go out one of the side or front exit doors. DSP B stated after Client #1 threatens to elope, staff body position by the doors to block, if needed, and encourage Client #1 to journal. DSP			

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	B said Client #1 consistently refused to journal with staff and would only journal with the QIDP. DSP B stated it had been one to two years since Client #1 journaled with staff. DSP B said when Client #1 was agitated he/she was redirected to his/her room to calm and staff completed 10 minute checks unless Client #1 had made excessive threats to elope then staff completed more frequent checks. DSP B reported she had never witnessed Client #1 attempt to elope from the window until 12/15/16. When interviewed on 1/11/17 at 12:25 p.m., DSP C reported on 12/15/16 Client #1 was upset and redirect to his/her bedroom to calm. She said once in his/her bedroom, Client #1 was observed by the window and was redirected to sit on his/her bed. DSP C stated staff left the bedroom and closed the door; Client #1 came out of the room one time and was redirected to continue to calm down for a few more minutes. DSP C reported approximately 3 minutes later, staff opened the door to check on Client #1 and found he/she had eloped from the bedroom window. DSP C reported staff immediately went outside and found Client #1 running through the back yard near a trail by the fence to the high school field. Client #1 was assisted back to the facility and placed in time-out. DSP C reported it was common knowledge Client #1 had a history of attempting to elope, including out of his/her bedroom window. DSP C said staff were verbally instructed to increase supervision when Client #1 threatened to elope but reported there was nothing in the BMP regarding increased supervision after threats to elope. DSP C reported staff would also position by exit doors after Client #1 threatened to elope to ensure safety			

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	and monitoring. DSP C stated Client #1 refused to journal with any staff and would only journal with the QIDP. She recalled one time Client #1 journaled with staff and it was when he/she had an ill family member. When interviewed on 1/11/17 at 1:30 p.m., DSP D reported she worked on 12/30/16. She stated Client #1 had requested his/her kindle back but stated Client #1 still had 1 hour left before it was to be returned. She stated then client #1 wanted to call the QIDP; staff asked Client #1 to wait as they were assisting others at the time. DSP D stated at this time she went to answer a call light. DSP D reported she returned to the main area 15-20 minutes later, answered the phone, and was informed by HS A Client #1 was at her house. DSP D reported staff drove to HS A's home and picked up Client #1 after reporting the incident to the on-call supervisor. DSP D stated the police were at HS A's home and had reported Client #1 stopped at a residence and told the woman he/she was homeless; the woman called the police. Client #1 was to have visual checks completed every 15 minutes when he/she was not agitated and every 10 minutes if Client #1 was agitated. DSP D reported everyone, staff and management, were aware of Client #1's history of elopement. She reported Client #1 would threaten to elope from the door and/or his/her bedroom window. She stated staff were verbally instructed to increase supervision of Client #1 after threats to elope but it was not incorporated into Client #1's BMP. She reported staff would stand outside Client #1's bedroom door and increase checks if the door was closed. DSP D stated other times, staff would not allow Client #1 to close his/her bedroom door until he/she appeared to calm.			

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	DSP D reported Client #1 refused to journal with anyone except the QIDP. She stated when Client #1 was not upset, on rare occasion he/she would request staff to journal with him/her. When interviewed on 1/11/17 at 2:40 p.m., DSP E on 12/30/16 after she finished assisting other clients, DSP D informed her Client #1 had eloped and was at HS A's home. DSP E stated she stayed at the facility while DSP D and other staff went to pick up Client #1. She stated it was common knowledge that Client #1 would threaten to and attempt to elope out of a door or his/her bedroom window. She said staff would position by exit doors when Client #1 threatened to elope. She reported if Client #1 went to his/her bedroom, staff would complete 10 minute checks. DSP E stated she never observed staff increase monitoring of Client #1 during these times. DSP E reported she was not instructed to increase monitoring after Client #1 threatened to elope. DSP E confirmed Client #1 refused to journal with any staff and would only journal with the QIDP. When interviewed on 1/12/17 at approximately 9:40 a.m., the QIDP confirmed staff utilized interventions not included in the BMP. She stated staff had been verbally instructed to increase supervision and to block exit doors when Client #1 attempted to or threatened to elope from the facility. She confirmed the BMP lacked these interventions. The QIDP acknowledged journaling was an ineffective intervention since Client #1 consistently refused to journal with staff. The QIDP confirmed the BMP had not been revised to incorporate interventions			

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	being utilized to prevent elopement behaviors. When interviewed on 1/11/17 at 4:10 p.m., Client #1 reported he/she had left from his/her bedroom window two times. Client #1 reported he/she left through the window because staff blocked the doors. Client #1 reported he/she had attempted to elope from the bedroom window "a lot" but had been blocked by staff until these two incidents when no staff was present in the bedroom. Client #1 reported he/she left through the window and went to the right, pointing toward the back yard. He/She stated he/she didn't get very far before staff found him/her in the backyard, near the fence to the high school field. Client #1 reported staff observed him/her and assisted him/her back to the facility. Client #1 stated the last time (12/30/16) he/she was able to leave without staff knowledge, he/she went to HS A's house and staff picked him/her up. Client #1 reported prior to arriving to HS A's home, he/she stopped at a house in the community and told the lady he/she was homeless. Client #1 said the woman told him/her that he/she could not live there and informed Client #1 she would contact the police. Client #1 reported he/she would only journal with the QIDP after he/she calmed down. Client #1 stated he/she was not comfortable journaling with staff. Client #1 stated he/she preferred to listen to music, color, or latch hook to calm down.			
64.60	**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			

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	regulations is available on request from the Health Facilities Division, Department of Inspections and Appeals, Lucas State Office Building, Des Moines, Iowa 50319. 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. This rule is intended to implement Iowa Code section 135C.2(3).			
W 266	The facility must ensure that specific client behavior and facility practice requirements are met. **DESCRIPTION:** Based on interviews and record reviews, the facility failed to maintain minimal compliance with the Condition of Participation (CoP) - Client behavior and facility practices. The facility failed to ensure all behavior management interventions utilized were incorporated as approved techniques in the facility policy. The facility verbally instructed staff to utilize interventions to address elopement behaviors, but failed to thoroughly integrate the interventions into the IPP to safeguard the client. Cross reference W276: Based on interview and record review, the facility failed to ensure all interventions utilized in the management of inappropriate client behavior were incorporated into the facility policy, as evidenced by failure to include the use of a physical move as part of the hierarchy of behavior management techniques utilized. Cross reference W288: Based on interviews and record review, the facility failed to ensure staff implemented client Behavior Management Programs (BMPs) as written			

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	and/or to revise the program to incorporate all interventions being utilized.			
50.7(4)	**481—50.7(10A,135C) Additional notification.** The director or the director's designee shall be notified within 24 hours, or the next business day, by the most expeditious means available (I,II,III): **50.7(4)** When a resident elopes from a facility. For the purposes of this subrule, "elopes" means when a resident who has impaired decision-making ability leaves the facility without the knowledge or authorization of staff. **DESCRIPTION:** Based on interviews and record review, the facility failed to report all incidents of client elopement, in accordance with state rules. This affected 1 of 1 client (Client #1) involved in investigation #64945-I. Finding follows: Review of Client #1's behavior reports revealed on 12/15/16 Client #1 broke the screen from his/her bedroom window and attempted to elope. Staff blocked Client #1 and redirected him/her to sit on his/her bed and calm down. Staff left his/her bedroom after Client #1 appeared calmer. A few minutes later, Client #1 attempted to leave his/her room and was redirected to calm for a few more minutes. The report then noted, "After 3 minutes, a check was done and it was	**II**	**$500**	**Upon Receipt**

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	discovered (he/she) left out the window..." According to the document, staff located Client #1 running through the backyard of the facility. When interviewed on 1/5/16 at approximately 1:00 p.m., House Supervisor (HS) B stated on 12/15/16 Client #1 became upset and went to his/her room to calm. She stated once in his/her bedroom, Client #1 attempted to elope from his/her window but was blocked and redirected to sit on his/her bed and calm down. She said Client #1 sat on his/her bed and after a few minutes staff left his/her bedroom but immediately re-entered the room when they heard the window being opened. She stated staff again blocked Client #1 and after he/she calmed for a few minutes they left the room and closed the door. HS B reported within two to three minutes a check was completed and found Client #1 had eloped from his/her bedroom window. She said staff immediately went outside and found Client #1 running through the back yard of the facility. HS B stated she picked up Client #1 in her vehicle, brought him/her back into the facility, and Client #1 was placed in time-out. HS B said a shadow staff was then assigned to Client #1 and a board was secured across the bedroom window. HS B reported the Qualified Intellectual Disability Professional (QIDP) and Director of Programming Services (DPS) were informed of the elopement and both came into the facility. When interviewed on 1/11/17 at approximately 11:15 a.m., Therapeutic Technician (TT) A reported she was present on 12/15/16 when Client #1 eloped from his/her bedroom window. She stated Client #1 was upset and was redirected to his/her bedroom to calm. TT A stated			

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	once in his/her bedroom, Client #1 attempted to bust the screen out of the window and threatened to elope. Client #1 was redirected and a few minutes later all staff left his/her bedroom and closed the door. TT A stated a check was completed within a few minutes and it was discovered Client #1 had eloped from his/her bedroom window. TT A stated footprints were observed in the snow outside Client #1's bedroom window and leading away from the facility. She reported staff went outside and found Client #1 running through the backyard. TT A stated Client #1 was brought back to the facility and placed in time-out. TT A stated she had never witnessed Client #1 elope from his/her bedroom window prior to this incident but had been informed Client #1 had a history of attempting to elope from the window. When interviewed on 1/11/17 at 4:10 p.m., Client #1 reported he/she left through the window because staff blocked the doors. Client #1 reported he/she had attempted to elope from the bedroom window "a lot" but had been blocked by staff until these two incidents when no staff was present in the bedroom. Client #1 reported he/she left through the window and went to the right, pointing toward the back yard. He/She stated he/she didn't get very far before staff found him/her in the backyard, near the fence to the high school field. Client #1 reported staff observed him/her and assisted him/her back to the facility. contact the police. When interviewed on 1/5/16 at approximately 1:30 p.m., the QIDP stated she was not aware Client #1 had actually eloped out of his/her bedroom window on 12/15/16. She stated Client #1 had made several			

Facility Administrator Date

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FC#6433				**Date: 2/1/17**
Opportunity Living #1		**Survey Dates: 1/5/17, 1/11/17, 1/12/17**		
105 Westview				
Lake City, IA 51449	**JKM**			
		Class	**Fine Amount**	**Correction date**
	attempts to elope and actually went out of the window one time but thought staff had observed him/her. When interviewed on 1/5/17 at approximately 1:45 p.m., the DPS stated the elopement on 12/15/16 was not reported to the Department of Inspections and Appeals because he was unaware Client #1 had actually eloped. He said the incident was explained as staff had observed Client #1 leave through his/her bedroom window. He stated he was not informed staff discovered he/she had eloped from the window and was located running through the backyard. **FACILITY RESPONSE:**			

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