

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

Citation Number: 6470		Date: March 2, 2017		
Facility Name: Grandview Heights Inc.		Survey Dates: February 8-22, 2017		
Facility Address/City/State/Zip 910 East Olive Marshalltown, IA. 50158		HL		
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date

58.43(9)	481—58.43(135C) Resident abuse prohibited. 58.43(9) Allegations of dependent adult abuse. Allegations of dependent adult abuse shall be reported and investigated pursuant to Iowa Code chapter 235E and 481—Chapter 52. (I, II, III)	II	\$500.00	Upon Receipt
52.2(2)a	481—52.2(235E) Persons who must report dependent adult abuse and the reporting procedure for those persons. 52.2(2) Reporting suspected dependent adult abuse 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.			
235E.2(3)(a)	Iowa Code section 235E.2(3)(a) 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. DESCRIPTION: Based on record review, interviews, and facility policy,			

Facility Administrator

Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty-five percent (35%) pursuant to Iowa Code section 135C.43A (2013).

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

Citation Number: 6470		Fine amount reduced by 35% to \$325.00 on March 15, 2017 pursuant to Iowa Code Section 135C.43A		Date: March 2, 2017	
Facility Name: Grandview Heights Inc.		Survey Dates: February 8-22, 2017			
Facility Address/City/State/Zip 910 East Olive Marshalltown, IA. 50158					
		HL			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

	<p>the facility failed to report an allegation of abuse timely to the Department of Inspections and Appeals (DIA) for one (1) of five (5) residents reviewed. The facility reported a census of 91 residents.</p> <p>Findings include:</p> <p>According to the MDS (Minimum Data Set), dated 11/28/16, Resident #1 had diagnoses included aphasia, non-Alzheimer's dementia, anxiety and a transient cerebral ischemic attack. The resident sometimes had the ability to make self understood and understand others and exhibited moderately impaired cognitive skills. The resident exhibited physical behaviors 4-6 days a week and verbal and other behaviors 1-3 days a week. The resident required extensive assistance of two staff to transfer, ambulate and for toilet use and had been dependent on staff with dressing and personal hygiene.</p> <p>Resident #1's Care Plan with a focus area initiated on 12/8/16, indicated he/she had demonstrated physical and verbal behaviors related to dementia. The approaches included the following:</p> <ul style="list-style-type: none"> a. The resident resided in the Chronic Confused and Demented Illness (CCDI) unit of the facility for decreased amounts of stimulation. b. The resident had a tendency for verbally and physically aggressive behaviors with all cares. Staff should assure he/she had been safe and re-approach later. c. Staff should intervene before Resident #1's agitation escalated, and guide the resident away from the 			
--	---	--	--	--

Facility Administrator

Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty-five percent (35%) pursuant to Iowa Code section 135C.43A (2013).

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

Citation Number: 6470		Fine amount reduced by 35% to \$325.00 on March 15, 2017 pursuant to Iowa Code Section 135C.43A		Date: March 2, 2017	
Facility Name: Grandview Heights Inc.		Survey Dates: February 8-22, 2017			
Facility Address/City/State/Zip 910 East Olive Marshalltown, IA. 50158					
		HL			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

	<p>source of distress or calmly engage in conversation; if the resident remained aggressive, staff should calmly walk away and approach later.</p> <p>According to the Witness Interview Notes (provided by the Administrator) on 12/1/16 at approximately 10:15 a.m. an Licensed Practical Nurse (LPN) reported an alleged abuse incident between Staff A and Resident #1. Staff B had witness an alleged abuse incident of Staff A striking Resident #1's hip with an open hand. Staff A was on break when the Administrator received the report and was immediately separated with an onset of an investigation.</p> <p>During an interview 2/8/17 at 10 a.m., Staff B, CNA indicated on 12/1/16 just after 10 a.m., herself and Staff A assisted the resident out of bed who had been feisty at the time by hitting and pinching the 2 staff members. Staff A and B assisted the resident into the bathroom and sat him/ her on the toilet while the resident continued hitting the staff. Staff A raised her voice and kept trying to redirect the resident in a positive manner. Staff B stated Staff A displayed a gruff voice which she thought irritated the resident more. While Staff A held the resident's bilateral hands/wrists to stop him/her from hitting and pinching them the resident had been able to get one wrist free and did something to Staff A but she was unaware of what that was so Staff A slapped the resident's bare left hip. Staff B had not known how hard [the resident had been slapped] but she was able to hear a slap sound.</p> <p>Staff B then asked Staff A what she just did, and Staff</p>			
--	---	--	--	--

Facility Administrator

Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty-five percent (35%) pursuant to Iowa Code section 135C.43A (2013).

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

Citation Number: 6470		Fine amount reduced by 35% to \$325.00 on March 15, 2017 pursuant to Iowa Code Section 135C.43A		Date: March 2, 2017	
Facility Name: Grandview Heights Inc.		Survey Dates: February 8-22, 2017			
Facility Address/City/State/Zip 910 East Olive Marshalltown, IA. 50158					
		HL			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

	<p>A said, you are not going to report me, are you? The 2 staff members continued cares and Staff B immediately reported the incident to Staff C, LPN.</p> <p>During an interview 2/8/17 at 10:20 a.m., Staff C indicated on 12/1/16 somewhere between 9:30 and 10:30 a.m., Staff B came out of the unit and told her Staff A just slapped the resident's hip because something happened between them during cares. Staff C informed the Director of Nursing (DON) and Administrator within 3 minutes.</p> <p>The facility did not report the incident to Department of Inspections and Appeals (DIA) until Sunday 12/4/17 at 10:05 a.m.</p> <p>During an interview 2/8/17 at 8:55 a.m., the Administrator confirmed the alleged incident had not been reported timely.</p> <p>The facility Abuse Policy revised 8/16 directed staff of the following: Reporting: If a staff member or employee had been required to make a report pursuant of this section, the staff member or employee shall immediately notify the person in charge or the person's designated agent who should notify DIA immediately in no later than 24 hours of any allegation, even on the weekend or holiday.</p> <p>FACILITY RESPONSE:</p>			
--	--	--	--	--

Facility Administrator

Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty-five percent (35%) pursuant to Iowa Code section 135C.43A (2013).

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

Citation Number: 6470		Fine amount reduced by 35% to \$325.00 on March 15, 2017 pursuant to Iowa Code Section 135C.43A		Date: March 2, 2017	
Facility Name: Grandview Heights Inc.		Survey Dates: February 8-22, 2017			
Facility Address/City/State/Zip 910 East Olive Marshalltown, IA. 50158					
		HL			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

--	--	--	--	--

Facility Administrator

Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty-five percent (35%) pursuant to Iowa Code section 135C.43A (2013).