Iowa Department of Inspections and Appeals
Health Facilities Division
Citation

Citation Number: **FC # 6526**	Fine amount reduced by 35% to $325.00 on May 18, 2017 pursuant to Iowa Code Section 135C.43A		**Date:** **May 9, 2017**
Facility Name: **Mosaic- 217 Maple**		**Survey Dates:** **April 24, 2017 to April 26, 2017**	
Facility Address/City/State/Zip **217 Maple Ave** **Nevada, IA 50201**			
	HL		

Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date
64.33(1)	**481—64.33(135C) Allegations of dependent adult abuse.** **64.33(1) *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**
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.**			
52.2(2)a	**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.**			
W153 &	**483.420(d)(2) STAFF TREATMENT OF CLIENTS** **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**			

_____ _____

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: **FC # 6526**	Fine amount reduced by 35% to $325.00 on May 18, 2017 pursuant to Iowa Code Section 135C.43A		**Date:** **May 9, 2017**
Facility Name: **Mosaic- 217 Maple**		**Survey Dates:** **April 24, 2017 to April 26, 2017**	
Facility Address/City/State/Zip **217 Maple Ave** **Nevada, IA 50201**			
	HL		

Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date
&	**accordance with State law through established procedures.** **481-64.60(135C) Federal regulations adopted - conditions of participation. Regulations in 42 CFR Part 483, Subpart D, and 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.** **Classification of violations is I, II, and III, determined by the division using the provision 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).** **DESCRIPTION:** Based on record review, interviews, and facility policy, the facility failed to report an allegation of abuse timely to the Department of Inspections and Appeals (DIA) for 1 of 1 client (Client #1); and failed to ensure staff intervened and immediately reported allegations of abuse to the administrator per the facility policy. This affected 1 of 1 client during the investigation of incident #67131-I (Client #1). Findings follow:			

_____ _____

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: **FC # 6526**	Fine amount reduced by 35% to $325.00 on May 18, 2017 pursuant to Iowa Code Section 135C.43A		**Date:** **May 9, 2017**
Facility Name: **Mosaic- 217 Maple**		**Survey Dates:** **April 24, 2017 to April 26, 2017**	
Facility Address/City/State/Zip **217 Maple Ave** **Nevada, IA 50201**			
	HL		

Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date
	1. Record review on 4/25/17 revealed an e-mail sent by the Direct Support Manager (DSM) to the Program Coordinator (PC) and the Habilitative Coordinator (HC) on 2/14/17. The e-mail noted Direct Support Associate (DSA) C approached her on the morning of 2/14/17 to report DSA B pushed and shoved Client #1 on 2/11/17. Further record review revealed e-mails from the HC and Associate Director (AD) requesting the DSM make further inquiries into the allegation. An e-mail to the HC from the DSM dated 2/14/17 at 9:09 a.m. noted DSA C demonstrated what she saw by pushing the DSM across the living room to a recliner, then pushed the DSM into the chair. A summary statement signed by the HC on 2/25/17 noted the DSM followed up with staff and conducted re-training. When interviewed on 4/25/17 at 11:58 a.m., the DSM recalled the HC directed her to speak with DSA B regarding an allegation she pushed/shoved Client #1. When interviewed on 4/25/17 at 11:25 a.m. the HC confirmed DSA C alleged DSA B pushed Client #1 into a chair on 2/11/14 but failed to report the incident until 2/14/17. She stated she reported the incident to the AD who determined the incident only required re-training of staff. She confirmed the facility failed to report the incident to the DIA. Record review of the facility Adult Abuse and Reporting Reasonable Suspicion of a Crime policy on			

_____ _____

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: **FC # 6526**	Fine amount reduced by 35% to $325.00 on May 18, 2017 pursuant to Iowa Code Section 135C.43A		**Date:** **May 9, 2017**
Facility Name: **Mosaic- 217 Maple**		**Survey Dates:** **April 24, 2017 to April 26, 2017**	
Facility Address/City/State/Zip **217 Maple Ave** **Nevada, IA 50201**			
	HL		

Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date
64.60(135C)	4/25/17 revealed the following: "The associate director or executive director are the designated employee to immediately make all reports of alleged abuse to the appropriate state agency." The document directed notification to the state agency would occur within 24 hours of the allegation. When interviewed on 4/25/17 at 9:34 a.m., DSA C stated she witnessed DSA B push Client #1 into a chair and when he/she got up and walked to the kitchen, DSA B shoved Client #1 into the living room. She couldn't recall the exact date of the incident but stated she failed to report the incident until a few days later. 2. Record review on 4/24/17 revealed a facility internal investigation packet, completed 3/23/17. The packet contained a copy of an e-mail sent by Direct Support Associate (DSA) A to the Habilitative Coordinator (HC), the Program Coordinator (PC) and the Direct Support Manager (DSM) on 3/12/17. The e-mail noted concerns regarding DSA B's treatment of clients at the home, and specifically noted DSA B failed to offer Client #1 breakfast and sent him/her back to his/her bedroom so she didn't have to "deal with a behavior." Additional record review revealed a written statement signed by DSA A on 3/21/17. The statement noted Client #1 came out of his/her bedroom on 3/11/17 at approximately 8:00 a.m. and DSA B directed him/her back to his/her room continuously. She wrote the redirection lasted for 2 and 1/2 hours. DSA A's documentation revealed DSA B failed to offer Client #1			

_____ _____

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: **FC # 6526**	Fine amount reduced by 35% to $325.00 on May 18, 2017 pursuant to Iowa Code Section 135C.43A		**Date:** **May 9, 2017**
Facility Name: **Mosaic- 217 Maple**		**Survey Dates:** **April 24, 2017 to April 26, 2017**	
Facility Address/City/State/Zip **217 Maple Ave** **Nevada, IA 50201**			
	HL		

Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date
	breakfast on 3/11/17. Continued record review revealed another written statement by DSA A signed on 3/21/17. The statement noted on the morning of 3/12/17, DSA B again consistently directed Client #1 to his/her bedroom without offering him/her breakfast. Record review on 4/24/17 revealed the facility Adult Abuse and Reporting Reasonable Suspicion of a Crime policy. The document read, "Any employee who observes or suspects abuse, observes or reasonably suspects a crime, neglect, exploitation or mistreatment of a person served shall intervene immediately on the person's behalf to ensure safety and shall report the incident immediately following guidelines in this policy and procedure." The policy noted staff should report to the DSM, PC, HC, Associate Director or Executive Director. When interviewed on 4/24/17 at 3:20 p.m., DSA A confirmed DSA B failed to offer Client #1 breakfast on 3/11/17 and 3/12/17. She stated she sent an e-mail to the DSM on 3/12/17 regarding the incidents. When interviewed on 4/26/17 at 11:15 a.m., the PC confirmed staff should report incidents of suspected abuse immediately. **FACILITY RESPONSE:**			

_____ _____

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: **FC # 6526**	Fine amount reduced by 35% to $325.00 on May 18, 2017 pursuant to Iowa Code Section 135C.43A		**Date:** **May 9, 2017**
Facility Name: **Mosaic- 217 Maple**		**Survey Dates:** **April 24, 2017 to April 26, 2017**	
Facility Address/City/State/Zip **217 Maple Ave** **Nevada, IA 50201**			
	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).