Iowa Department of Inspections and Appeals
Health Facilities Division
Citation

Citation Number: **FC 6672**	**Fine amount reduced by 35% to $325.00 on October 23, 2017 pursuant to Iowa Code Section 135C.43A**		**Date:** **October 10, 2017**
Facility Name: **Mosaic -1000 1st Street SE**		**Survey Dates:** **September 21-27, 2017**	
Facility Address/City/State/Zip **1000 First Street SE** **Clarion, IA. 50525**			
	HL	**Self Reported incident # 70830-I**	

Rule or Code Section	Nature of Violation	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, 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).**	**II**	**$500.00**	**Upon Receipt**
W249	**438.440 (d)(1) PROGRAM IMPLEMENTAION** **As soon as the interdisciplinary team has formulated a client's individual program plan, each client must receive a continuous active treatment program consisting of needed interventions and services in sufficient number and frequency to support the achievement of the objectives identified in the individual program plan.** **DESCRIPTION:** Based on interviews and record review, the facility failed to ensure staff implemented client Behavior Support Plans (BSP) as written, which resulted in a client elopement. This affected 1 of 1 client (Client #1) involved in investigation #70830-I. Finding follows:			

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Facility Administrator Date

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	Record review on 9/21/17 revealed facility internal investigation, initiated 8/25/17. According to the internal investigation, on 8/25/17 at approximately 1:30 p.m. Client #1 and his/her peers returned to the facility from day services. After assisting all individuals into the facility, Direct Support Associate (DSA) A turned to assist another individual and when she turned back around, she observed the living room door open and Client #1 not present in the facility. According to the document, DSA A immediately went outside and found Client #1 by the van in the facility driveway. DSA A assisted Client #1 back into the facility and turned the door alarm on. The internal investigation noted, staff reported the door alarm was turned off in the morning when they assisted all the clients onto the van to leave for day services. The investigation also revealed Client #1 was outside of the house unattended for a brief amount of time, maybe for a matter of seconds based on witness testimony from those staff in the home at the time of the incident. When interviewed on 9/21/17 at approximately 12:18 p.m. DSA A reported on 8/25/17 at approximately 9:30 a.m., she and DSA B assisted all clients on the van to leave for day services. DSA A said the door alarm was shut off while they assisted to load the van but was unable to recall who turned the alarm off. DSA A stated they returned to the facility from day services at approximately 1:30 p.m. DSA A said after assisting all the clients into the facility, Client #1 was in the living room when she turned to assist another individual. DSA A stated after she turned back toward the living			

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Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date
	room, she observed the living room door open and Client #1 not present. DSA A reported she immediately went outside and observed Client #1 crouched by the back of the van in the facility driveway. DSA A explained the van was backed in to park for closer access to the wheelchair lift. DSA A said she redirected Client #1 back into the facility, he/she walked inside without issue, and she reset the living room door alarm. DSA A confirmed the exit door alarms were to be set at all times as part of Client #1's Behavior Support Plan (BSP). When interviewed on 9/21/17 at 1:15 p.m., Client #2 stated on 8/25/17 when they returned from day services, the front door alarm did not sound when they entered the facility. Client #2 said he/she did not see Client #1 leave the facility but knew Client #1 was gone when he/she could no longer hear Client #1's footsteps in the facility. Client #2 reported DSA A left the kitchen and returned inside with Client #1. Client #2 said he/she thought it was less than a minute from the time he/she was no longer able to hear Client #1's footsteps to the time Client #1 returned inside with DSA A. Record review on 9/21/17 revealed Client #1 admitted to the facility on 8/17/17, but resided within the agency since 4/1/12. Client #1 was diagnosed with, but not limited to: profound intellectual disabilities, attention-deficit hyperactivity disorder, autistic disorder, and seizure disorder. Client #1 had a BSP, last updated 8/25/17, to address target behaviors of pinching, biting, hitting, and leaving the house without staff knowledge.			

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	Restrictive measures included behavior modifying medications (Aripiprazole, Diazepam, Olanzapine, Quetiapine, and Risperidone), exit door alarms, a motion detector at night by his/her bed, and one-on-one staff supervision when in the kitchen. The BSP noted Client #1 wore a helmet and gait belt during waking hours due his/her history of drop seizures. The BSP directed staff to scan the environment every few minutes to ensure Client #1's presence in the home and noted he/she was able to move around freely due to the doors being alarmed. The BSP instructed all entry and exit door alarms were to be activated at all times. When interviewed on 9/27/17 at 1:00 p.m., DSA B reported she worked with DSA A on 8/25/17. DSA B said between 9:00 a.m. and 10:00 a.m. she and DSA A assisted all clients onto the van and had shut the living room door alarm off due to the noise. DSA B reported once they returned to the facility at approximately 1:30 p.m., she and DSA A assisted all clients into the facility. DSA B reported while she assisted a client to take the garbage out the side door, she heard DSA A say "oh no" or something similar but continued out the side door with the other client. DSA B stated once she returned inside, DSA A told her Client #1 had gone outside and she (DSA A) located him/her by the back of the van. DSA B said after DSA A and Client #1 returned inside, the living room door alarm was turned on and all other entry/exit door alarms were checked. DSA B reported the nurse was still present at the facility and completed an assessment of Client #1 following the incident.			

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	When interviewed on 9/21/17 at 10:30 a.m., the Qualified Intellectual Disabilities Professional (QIDP) confirmed staff failed to follow Client #1's BSP when they turned off the door alarm to load the van. She stated per Client #1's BSP the entry and exit door alarms were to be activated at all times, even when taking all the clients out of the facility. **FACILITY RESPONSE:**			

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