

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

Citation Number: 6711		Date: December 6, 2017		
Facility Name: Opportunity Living #3		Survey Dates: November 20-22, 2017		
Facility Address/City/State/Zip 612 Eight Street Rockwell City, IA. 50579		HL		
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date

50.7(4)	<p>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.</p> <p>DESCRIPTION:</p> <p>Based on interviews and record review, the facility staff failed to report elopement of a client to the Department of Inspections and Appeals (DIA) within 24 hours, or the next business day. This affected 1 of 8 sample clients (Client #16). Finding follows:</p> <p>Review of facility incident reports (IRs) on 11/20/17 revealed a facility IR, dated 8/10/17. The report described an incident where Direct Support Professional A (DSP A) and DSP B assisted another client [in North Home] to bed and when they came out of that client’s room they observed Client #16 walk back into the North home. Both DSP A and DSP B were unaware Client #16 left the facility and went to South Home. DSP A stated she had supervision of Client #16 on this evening however assumed another staff supervised Client #16 while she assisted another client to bed. She further stated she was not aware Client #16 left the house as she did not hear the door alarm sound when Client #16 exited the building.</p> <p>When interviewed on 11/21/17 at 9:00 a.m., Direct Support Professional (DSP) A confirmed she worked second shift on 8/10/17. She said she assisted another</p>	II	\$500.00	Upon Receipt
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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 (2015).

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	<p>client with a brief change and putting her/him to bed when Client #16 walked to the facility's South Home next door. She did not realize Client #16 left the home/facility until he/she walked back in the door with a staff from the South home. She further stated she did not hear the door alarm sound.</p> <p>When interviewed on 11/21/17 at 9:40 a.m., Direct Support Professional (DSP) B confirmed she worked second shift on 8/10/17. She said she assisted Staff DSP A with putting another client to bed. Staff DSP B stated she did not realize Client #16 left the facility until a staff from the South home walked in the door with Client #16. She further stated she did not hear the door alarm sound [when the client left].</p> <p>When interviewed on 11/21/17 at 11:30 a.m., Direct Support Professional (DSP) D stated he recalled the incident with Client #16 coming into the South home. Staff DSP D reported he had been in the living room assisting another client when Client #16 came into the living room and took something. Staff DSP D reported Staff DSP C returned Client #16 to his/her home (North).</p> <p>When interviewed on 11/21/17 at 10:30 a.m., Direct Support Professional (DSP) C stated she did not recall the incident with Client #16 but stated Client #16 had entered the home without staff before.</p> <p>Record review on 11/20/17 revealed Client #16's Annual Staffing Conference Report dated 10/6/16 revealed " The gazebo area is fenced in and is thus</p>			
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	<p>safe for Client #16. Client #16 will walk through the gated gazebo area of North and South homes, and enter South home. However, staff supervision and presence is required when outdoors".</p> <p>Annual Evaluation Living Unit report, dated 10/6/16 revealed Client #16 will leave the home unattended but is in [staff] sight while keeping him/her safe. Client #16 is known to take other's items and hides them, even from the other homes.</p> <p>Client 16's annual report identified under supervision/elopement revealed due to the lack of survival skills & possibly that Client #16 could exit the home and cross the street (if she sees something visually appealing in the area);staff supervision & presence is required when outdoors.</p> <p>Record review on 11/20/17 revealed a facility policy called Opportunity Living Elopement Policy. The policy included "Elopement incidents will be appropriately communicated to the proper authorities, investigated and intervened in promptly." The policy further noted, "Prevention of Client/consumer elopement is every staff members responsibility. Prevention of elopement happens when there is appropriate accountability for clients/consumers, when there is knowledge of the client's/consumer's tendencies and when there is active communication taking place between staff and clients/consumers. The policy revealed if a client is missing Department of Inspections and Appeals should be contacted."</p> <p>When interviewed on 11/20/17 at 1:25 p.m., Qualified</p>			
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	<p>Intellectual Disabilities Professional (QIDP) A confirmed staff from South Home found Client #16 in South Home according to the incident report. She stated Client #16 did not leave the gated area between North and South Homes and she did not think this was an elopement therefore it did not need to be reported.</p> <p>When interviewed on 11/21/16 at 2:30 p.m., the Director of Programming and Services stated he didn't report the incident to the Department because there were no injuries and the client never left the facility, as he/she remained in a secured fenced area between the two homes. They did not consider this an elopement.</p> <p>FACILITY RESPONSE:</p>				
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