

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

Number FC#6795		Amended Citation – Fine amount reduced by 35% to \$3,022.50 on May 29, 2018. Pursuant to Iowa Code Section 135C.43A		Report date April 23, 2018	
Facility name Courage Homes		Survey dates: March 7-April 19 2018			
Facility address 5945 Morningside Ave					
City Sioux City, Iowa 51106		MW			
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, 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 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	\$4650.00	Upon Receipt	
W-127	§483.420(a)(5) Ensure that clients are not subjected to physical, verbal, sexual or psychological abuse or punishment; (Rev. 135, Issued: 02-27-15, Effective: 04-27-15, Implementation: 04-27-15)				
W-153	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 accordance with State law through established procedures. (Rev. 135, Issued: 02-27-15, Effective: 04-27-15, Implementation: 04-27-15)				
W-154	§483.420(d)(3) The facility must have evidence that all alleged violations are thoroughly investigated and				

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W-155	<p>(Rev. 135, Issued: 02-27-15, Effective: 04-27-15, Implementation: 04-27-15) §483.420(d)(3) must prevent further potential abuse while the investigation is in progress.</p> <p>DESCRIPTION:</p> <p>Based on interviews and record reviews, the facility failed to adequately identify abuse. As a result, the facility failed to take adequate and appropriate measures to ensure the safety of clients, including identification of abuse, investigation of alleged abuse, and implementation of safeguards to ensure the safety of all clients residing in the facility. This potentially affected all clients residing at Courage Homes and specifically Clients #7, #2, #1 and #3 Findings follow:</p> <p>1. Record review revealed Residential Living Assistant (RLA) A's employee chronology. An entry by the Program Coordinator (PC) dated 2/2/18 documented, "(RLA A) told me earlier this week that if you slap (Client #7's) hands, (he/she) stops picking. I asked her to define slapping (and) she said just play, not hard, she then swatted me softly. I told her (at) no time may we "playfully swat or hit" anyone. I explained that it can be misinterpreted (and) the person may think hitting is OK. She said she understood."</p> <p>Additional record review revealed no facility</p>				

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	<p>investigation could be located.</p> <p>When interviewed on 3/21/18 at 3:00 p.m., RLA A reported an incident with Client #2. She stated Client #2 had a sore on his/her buttocks and she assisted with his/her dressing change. Client #2 turned towards her and RLA A's right hand rested on Client #2's right forearm. Client #2 tried to bite RLA A's hand and as a "knee jerk reaction," she hit Client #2 on the hand. According to RLA A, she did not intend to hurt him/her. As RLA A hit Client #2, she stated, "no, don't do that." Client #2 replied, "Don't do that." RLA A told Client #2 he/she was right and she was sorry. RLA A stated she distracted Client #2 enough for the nurse to apply the new dressing. According to RLA A, she continually asked Client #2 if he/she was OK and he/she replied he/she was fine. RLA A stated Client #2 did not have any injuries. RLA A could not remember who else was in the room, but there was a nurse and another staff.</p> <p>When interviewed on 3/20/18 at 9:45 a.m., RLA B reported on 1/24/18, RLA B and RLA A assisted the nurse with Client #2's treatment. Client #2 rolled on his/her left side and he/she tried to bite RLA A. RLA A told RLA B she swatted Client #2 because he/she tried to bite. RLA B did not see or hear RLA A swat at Client #2. RLA B stated RLA A was close to Client #2's head and RLA B was at his/her hips. RLA B informed RLA A to document the behavior, but she did not. According to RLA B, RLA A talked to the PC the next day about swatting Client #2. RLA B stated RLA A also told the PIA</p>				

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	<p>(Physical Intervention Alternative) trainers about the incident. RLA B explained when Client #2 tried to bite or aggress they block him/her. RLA B did not report the incident, but stated she would report right away if she witnessed it. RLA B also stated they have busy days and sometimes forget or run out of time.</p> <p>When interviewed on 3/20/18 at 10:20 a.m., the PC reported RLA A had problems with redirection. The PC could not remember the date, but prior to 2/6/18, she talked to RLA A about swatting clients. According to the PC, Client #7 picked at his/her skin. RLA A stated if she swatted or smacked Client #7's hand he/she might stop picking. The PC did not think RLA A smacked Client #7's hand. The PC reported RLA A informed the PC how she playfully slapped Client #2 because he/she tried to bite her. The PC stated Client #2 had regularly scheduled dressing changes on a sore on his/her coccyx. Client #2, at times, was not cooperative with the dressing changes; he/she grabbed and pinched. The PC stated humor helped with Client #2. Talking or thinking about other things helped redirect Client #2. When interviewed by the PC, RLA B did not know RLA A slapped Client #2. According to the PC, if RLA B witnessed RLA A slap Client #2, she would report it. The PC was unsure if RLA B reported RLA A's admission to slapping Client #2. The PC could not recall who administered Client #2's treatment the day RLA A slapped him/her, nor did she remember interviewing the nurse. The PC stated RLA A demonstrated how she brushed her hand against</p>			

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	<p>Client #2's arm. In the PC's opinion, she felt RLA A's action was not abusive and she felt she handled it appropriately. The PC did not interview or talk to Client #2 about the incident until after a potential abuse incident occurred with Client #1, when she asked Client #2 if anyone hit him/her.</p> <p>2. Record review revealed Client #1's Injury Report dated 2/6/18, indicated, "(Licensed Practical Nurse (LPN) A) was walking into the living room when she heard (Resident Living Assistant (RLA) A) smack (Client #1's) hand. When asked what that noise was and what (happened), she admitted she smacked (Client #1's) hand. (LPN A) stated she didn't see what hand she smacked."</p> <p>When interviewed on 3/20/18 at 8:50 a.m., LPN A reported on 2/6/18 at approximately 6:30 a.m. to 7:00 a.m., she walked from the medication room to use the restroom. As she approached the dining room and living room area, she heard a smack or slap noise. LPN A remembered Client #1 and RLA A were the only two in the living room at that time. LPN A asked RLA A what the noise was. RLA A stated she slapped him/her because he/she kept taking off his/her oxygen. LPN A told RLA A, she could not do that. RLA A did not respond. LPN A reported the incident to First Shift Supervisor. LPN A took Client #1 into the dining room for either his/her feeding or a breathing treatment. She completed a skin assessment for injuries. LPN A found a scratch on the back of his/her hand, but no red area. LPN A described the scratch as possibly a day old and almost sealed. The scratch was not</p>				

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	<p>bleeding.</p> <p>When interviewed on 3/21/18 at 3:00 p.m., RLA A reported on 2/6/18 she stood in the living room and watched clients. She stated she turned to document on where clients were and what they were doing. RLA A remembered a couple clients in the living room, but she could not remember who they were. She stated the client's accountability sheets would contain that information. RLA A stood less than an arm's length away from Client #1. He/she faced the opposite direction as her, but she could see him/her out of the corner of her eye. Client #1 reached for his/her tubing with the backside of his/her hand against his/her face. According to RLA A, she moved her hand over to block and redirect Client #1's hand down. RLA A stated she hit the back of his/her hand just right to make a clap sound. She did not mean to hit him/her. She stated her right hand made contact with his/her right hand. LPN A asked what the noise was and RLA A responded she swatted Client #1. LPN A stated she wished she did not say that. The PC sent her home.</p> <p>3. Record review on 3/20/18 revealed Client #3's injury report dated 1/31/18. The report indicated, "(Client #3) was crawling under the table and (RLA C) grabbed (him/her) by (his/her) ankles and pulled (him/her) out from under the table." A description of the injury included possible bruising to the stomach, knees, and ankles. 24-hour physical assessment follow-up indicated, "Red area to (right) posterior shoulder." Administrative review</p>				

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	<p>indicated, "investigation started on 1/31/18 - Upon investigation it was determined that staff exercised poor judgement and did not execute proper PIA." Follow-up included, "Staff will go back through PIA and will be versed on BSP. Staff will receive a disciplinary."</p> <p>When interviewed on 3/20/18 at 3:28 p.m., Qualified Intellectual Disabilities Professional (QIDP) A reported RLA C retook PIA training on 2/14/18. RLA C never came back to work after the training. In QIDP A's opinion, RLA C assumed Client #3 was going to harm another client and felt he needed to stop him/her. QIDP A stated she never thought RLA C did things out of malice. She concluded the incident was not an act of aggression.</p> <p>When interviewed on 3/22/18 at 11:00 a.m., the Administrator acknowledged the facility failed to report potential abuse involving Client #2 and Client #3.</p> <p>When interviewed on 4/19/18 at 11:15 a.m., the Administrator acknowledged the facility failed to address potential abuse immediately and prevent reoccurrence.</p> <p>Record review revealed facility child and dependent adult abuse policy dated 7/16/15, indicated, "Mid-Step Services will make every effort to ensure the safety of the consumers and employees ... If an employee of Mid-Step Services witnesses an incident, has a suspicion, or</p>				

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	<p>reasonably believes a consumer has suffered abuse, the employee is required to take immediate steps to ensure that the suspected abuse is stopped, then report directly to the administrator, supervisor, on-duty administrator, and the appropriate regulatory agency (Department of Human Services or Department of Inspections and Appeals)."</p> <p>FACILITY RESPONSE:</p>				

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