		-				
Citation Number: 6923				Da ^r Fel		ry 27, 2019
Facility Name: Courage Home			Survey I January		oruar	ry 2, 3, 4, 2019
5945 Mornings			1			
Sioux City, IA	51106	LK	80532M & 80251A			
Rule or Code Section	Nature	e of Violation	Class	Fine Amou	unt	Correction date
64.60	and Sections 410 to 1988, are adopted a incorporated as par of these regulations from the Health Factorial Department of Insp. Lucas State Office Iowa 50319. Classification of violetermined by the provision in 481-Ch. Citations," to enfor This rule is intende Code Section 135C 481-64.33(2)(135C) abuser and victim. dependent adult ab reported, the admir shall separate the vabuser immediately	ns of participation. CFR Part 483, Subpart D, o 480 effective October 3, oy reference and rt of these rules. A copy s is available on request cilities Division, pections and Appeals, Building, Des Moines, Olations is I, II, and III, division using the napter 56, Fining and rce a fine to cite a facility. ed to implement lowa (2(3)). Separation of accused Upon a claim of ouse of a resident being nistrator of the facility victim and accused y and maintain the edepartment's abuse mpleted and abuse		\$1500 (treble)		Upon Receipt

Facility Administrator	Date

		-				
Citation Number 6923	er:				Date: Februa	ry 27, 2019
Facility Name: Courage Home	es		Survey Dates: January 8, 2019, February 2, 3, 4, 2			ry 2, 3, 4, 2019
Facility Address 5945 Mornings Sioux City, IA						
Cloux City, II		LK	80532M	& 80251	Α	
Rule or Code Section	Nature	e of Violation	Class	Fine A	mount	Correction date
\M4 F F	492 420/4//2/		Τ			
W155	483.420(d)(3)					
	The facility must pre while the investigation	vent further potential abuse on is in progress.				
	DESCRIPTION:					
	facility failed to ensu between the client a following an allegation of 1 client (Client #1)	and record review, the re continued separation and alleged perpetrator on of abuse. This affected 1 involved in the 32-M and #80251-A.				
	internal investigation According to the inve Residential Living As Residential Supervis RLA B slap Client #1 was yelling at him. T	estigation, on 12/2/18 ssistant (RLA) A reported to or (RS) A she witnessed on the hand while RLA B he investigation noted RLA 12/2/18 following the				
	When interviewed or Residential Living As reported on 12/1/18	,				

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 lowa Code section 135C.43A (2013).

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		_				
Citation Numb 6923	er:				Date: Februar	ry 27, 2019
Facility Name: Courage Homes			Survey I January		-ebruar	ry 2, 3, 4, 2019
Facility Address 5945 Mornings Sioux City, IA						
Sloux City, IA 51106		LK	80532M			
Rule or Code Section	Natur	Nature of Violation			nount	Correction date
	two times; RLA2 C s report to the on-duty she was in the nurse her of the allegation yell at Client #1 in th said she initially told continued to yell at C she went to the dinin leave the area and F C stated on 12/2/18, allegation and RLA E stated RLA B returne with Client #1 until th Department of Inspe would be investigatin said RLA B was ther different house, awa When interviewed or A reported on 12/2/1 witnessed RLA B sla she yelled at him. RS initiated an internal in speaking to RLA B, she at the stated RLA B was following the internal explained RLA B wo	n 2/5/19 at 10:15 a.m., RS 18 RLA A reported she ap Client #1 on the hand as S A said she immediately nvestigation and after she sent RLA B home. RS allowed to return to work				

Facility Administrator	Date

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Citation Numb 6923	er:				Date: Februai	ry 27, 2019
Facility Name: Courage Home			Survey Dates: January 8, 2019, February 2, 3, 4, 2			y 2, 3, 4, 2019
Facility Address 5945 Mornings Sioux City, IA			0050014	8 00054		
		LK	80532M	& 80251	A	
Rule or Code Section	Nature	e of Violation	Class	Fine A	mount	Correction date
	Physical Intervention behavior manageme after the facility was would be investigatir					

Page **4** of **5**

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 lowa Code section 135C.43A (2013).

Citation Number 6923	er:			Date: Februa	ry 27, 2019	
Facility Name: Courage Homes				Survey Dates: January 8, 2019, February 2, 3, 4, 20		
Facility Address/City/State/Zip 5945 Morningside Ave. Sioux City, IA 51106						
		LK	80532M	& 80251A		
Rule or Code Section	Natur	e of Violation	Class	Fine Amount	Correction date	

Facility Administrator	Data

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