

Iowa Department of Inspections and Appeals
Health Facilities Division
Citation

Citation Number: 7035		Date: September 11, 2019		
Facility Name: Tanager Place		Survey Dates: August 5, 6, 7, 8, 2019		
Facility Address/City/State/Zip 2309 C Street SW Cedar Rapids, IA 52404				
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date
64.60	<p>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.</p> <p>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.</p> <p>This rule is intended to implement Iowa Code Section 135C.2(3).</p>	II	\$1500.00 (trebled \$500)	Upon Receipt
50.7	<p>481-50.7(10A,135C) Additional notification. The director or the director's designee shall be notified within 24 hours, or the next business day, by the most expeditious means available:</p> <p>50.7(3) When there is an act that causes major injury to a resident or when a facility has knowledge of a pattern of acts committed by the same resident on another resident that results in any physical injury. For the purposes</p>			

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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).

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	<p>of this subrule, " pattern " means two or more times within a 30-day period.</p> <p>DESCRIPTION: Based on interview and record review, the facility failed to notify the Department of Inspections and Appeals (DIA) within 24-hours after a client exhibited a pattern of peer-to-peer aggression resulting in injury more than two times in a 30-day period, as required by Iowa Code 481 IAC 50.7(3). This affected 9 of 9 clients (#1, 3, 7, 8, 9, 11, 13, 15, and 16) involved in the investigation of incident #84108-I, #84399-I, and #85063-I. Findings follow:</p> <p>1. Record review on 8/5/19 revealed a facility Critical Incident Report (CIR), dated 6/21/19. The report noted Client #13 engaged in peer-to-peer aggression resulting in injury lasting 24-hours on 5/21/19, 5/24/19, and 5/31/19. The CIR documented on 5/21/19, Client #13 bit Client #11 on her left tricep and the bite mark was still visible when 24-hour follow-up was completed. On 5/24/19, Client #11</p>			

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	<p>and Client #13 were standing next to each other eating snack when they began kicking each other. Client #11 slapped Client #13 and Client #13 hit and grabbed Client #11's hair. During the 24-hour follow-up, Client #11 reported soreness and pain from her hair being pulled. The CIR noted the incident on 5/31/19 occurred when Client #13 slapped Client #11 on the back of the neck after Client #11 was closing the door to the family room so Client #13 could not watch the movie. Client #11 reported soreness and pain in her neck during the 24-hour follow-up. The facility reported the three incidents to the DIA on 6/21/19.</p> <p>2. Record review on 8/5/19 revealed a CIR, dated 6/21/19. The report noted Client #1 had hit Client #7 on 6/10/19 with a broom resulting in a bruise on Client #7's pinky finger. On 6/11/19, Client #1 punched Client #8 in the face; Client #8 had a sore face and a bump/knot during the 24-hour follow-up. The facility failed to report the incidents to the DIA until 6/21/19. The facility completed an amended CIR on 7/8/19 (Monday) after Client #1 punched</p>			

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	<p>Client #7 in the face after Client #7 hit staff on 7/5/19 (Friday). Client #7 had a small bruise on the left side of his nose during the 24-hour follow-up.</p> <p>3. Record review on 8/5/19 revealed a CIR, dated 7/16/19. According to the report, on 5/28/19 Client #8 hit Client #7 in the back with a scooter resulting in a bruise on Client#7's back observed during the 24-hour follow-up. On 5/31/19, Client #8 shoved Client #3 to the ground resulting in a small scratch on Client #3's knee, which remained visible during the 24-hour follow-up. The facility failed to report the two incidents to the DIA until 7/17/19.</p> <p>Additional record review revealed the "ICFID Peer to Peer Reporting Guidelines," undated. The guidelines instructed "QIDP(s) (Qualified Intellectual Disability Professional) and Program Manager are responsible for monitoring and reporting peer to peer aggression." The guidelines instructed direct care staff were to document the peer-to-peer aggression and e-mail the report to the Program Manager,</p>			

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	<p>Shift Leader, and QIDP prior to the end of the shift. Direct care staff working the following shift was to complete the required 24-hour follow up for possible or sustained injuries and document in the shift change over communication. The QIDP was to input the peer-to-peer aggression on the spreadsheet and complete necessary follow-up which included ensuring 24-hour accident/injury follow-up had been completed. The guidelines defined an injury as "lasting longer than 24 hours therefore requiring a healing process."</p> <p>When interviewed on 8/5/19 at approximately 3:30 p.m., Qualified Intellectual Disability Professional (QIDP) A said based on how the facility defined an injury any time a client reported pain when completing the 24-hour follow-up the facility considered the client had an injury. She provided the facility peer-to-peer tracking sheet. The QIDP stated the facility would be completing another self-report on 8/5/19 due to Client #13 aggressing toward his peers and resulting in injury. She showed the Surveyor the peer-to-peer tracking</p>			

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	<p>sheet and stated the facility would include all four incidents in the self-report.</p> <p>Review of the peer-to-peer tracking sheet revealed Client #13 hit Client #11 on her back and pulled her hair on 7/5/19; Client #11 reported her head hurt during the 24-hour follow-up. The second incident occurred on 7/9/19 when Client #13 punched Client #9 in the mouth after Client #9 accidentally hit Client #13's arm with a metal pole. During the 24-hour follow-up, Client #9 appeared to have a small fat lip. A third incident occurred on 7/30/19. Client #13 and Client #15 were play fighting when Client #13 pushed Client #15. Client #15 fell against the window and to the floor resulting in a red mark on his thigh. During the 24-hour follow-up, Client #15 reported the area was tender. A fourth incident occurred on 7/31/19 when Client #13 threw a stick at Client #16 and caused an abrasion on her chest; the mark was still present during the 24-hour follow-up.</p> <p>When interviewed on 8/7/19 at 9:55 a.m., the Program Manager (PM) explained once</p>			

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	an Accident Injury Report (AIR) was completed it was e-mailed to right away to several people including the QIDPs. She stated 24-hour follow-up was not always communicated right away and felt this was part of the breakdown for identifying injuries from peer-to-peer aggressions. During a follow-up interview on 8/7/19 at 2:20 p.m., The PM confirmed the facility had not reported all incidents of peer-to-peer aggression resulting in injury to the DIA timely. She stated she would be completing the CIR for the incidents with Client #13 in July.			
FACILITY RESPONSE:				