

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

Citation Number: 7006		Date: July 16, 2019		
Facility Name: Opportunity Living I		Survey Dates: June 4, 5, 6, 10, 11, 12, 13, 2019		
Facility Address/City/State/Zip 105 Westview Lake City, IA 51449		LK 83302-I & 83120-M		
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. This rule is intended to implement Iowa Code Section 135C.2(3).</p>	II	\$500	Upon Receipt
W153	<p>483.420(d)(2) STAFF TREATMENT OF CLIENTS</p> <p>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.</p>			
58.43(9)	<p>481—58.43(135C) Resident abuse</p>			

Facility Administrator

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52.2(a)	<p>prohibited.</p> <p>58.43(9) Allegations of dependent adult abuse. Allegations of dependent adult abuse shall be reported and investigated pursuant to Iowa Code chapter 235E and 481—Chapter 52. (I, II, III)</p> <p>481—52.2(235E) Persons who must report dependent adult abuse and the reporting procedure for those persons.</p> <p>52.2(2) Reporting suspected dependent adult abuse in facilities or programs.</p> <p>481-64.33(2)(135C) Separation of accused abuser and victim. Upon a claim of dependent adult abuse of a resident being reported, the administrator of the facility shall separate the victim and accused abuser immediately and maintain the separation until the department's abuse investigation is completed and abuse determination is made.</p> <p>483.420(d)(3)</p> <p>The facility must prevent further potential</p>			
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	<p>abuse while the investigation is in progress.</p> <p>Based on interviews and record review, the facility failed to ensure staff immediately reported abuse, neglect, and or mistreatment of clients to the administrator or designee. This affected 2 of 2 clients identified as a result of investigation #83120-M and #83302-I (Clients #2 and #5). Findings Follow:</p> <p>1. Record review on 6/4/19 revealed Client #5's Behavior Report and restraint log, dated 5/5/19, completed by Direct Support Professional A (DSP A). According to the log Client #5 went to the timeout room from 12:45 p.m. to 12:48 p.m. and from 12:48 p.m. -1:00 p.m.</p> <p>Continued record review revealed an alleged abuse report, completed by Certified Medication Aide A (CMA A) on 5/6/19. She documented she found Client #5 locked in the time out room with a vacuum blocking the door at approximately 1:00 p.m. CMA A noted she arrived to the home to drop something off to DSP B. Another staff told her he was in the back of the home with Client #5 in the time out room. CMA A walked back to the time out room and saw the vacuum holding the time out</p>			
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	<p>room door shut and DSP B nowhere around. CMA A returned to the front of the home to inquire about DSP B's whereabouts. Staff told her he was with Client #5 in the time out room and she informed them he was not there and a vacuum held the door shut. CMA A called DSP B's name and he answered from the restroom. She tried to go in, but the door was locked. DSP B informed her he was washing his hair.</p> <p>Record review on 6/4/19 revealed the facility Abuse Policy. The Mandatory Reporter's Instructions directed staff to immediately diffuse any incident of abuse by instructing the staff to "TAKE FIVE" and separate the client and the staff. Once the Client and staff were separated, staff were directed to "immediately" contact the appropriate supervisor to report the incident.</p> <p>When interviewed on 6/5/19 at 1:45 p.m. DSP A stated she saw the vacuum blocking the time out door on 5/5/19 and removed it. She stated she did not report the incident until the following day when she asked about it as part of a facility investigation. She said she is aware of the facility policy and should have reported the incident. On 6/12/19 at 12:10 p.m. DSP A confirmed the restraint log on 5/5/19 was completed by her. She said when she removed</p>			
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	<p>the vacuum at 12:48 p.m. she did not report the incident.</p> <p>When interviewed on 6/6/19 at 10:30 a.m. CMA A stated she saw the vacuum blocking the time out door on 5/5/19 at about 1:00 p.m. and removed it. She stated she wrote a note about the incident and left it for her supervisor, but did not report the incident to the on-call supervisor. The following day when the note was discovered an investigation was initiated. She said she is aware of the facility policy and should have reported it to the on-call supervisor.</p> <p>When interviewed on 6/5/19 at 3:45 p.m. DSP B stated he took Client #5 into the time out room for approximately 15 minutes. He admitted to using the vacuum to block the door and said he only did it because DSP A told him to do it. He stated he knew this was wrong and should not have done this. He stated he only did this one time and CMA A let Client #5 out of the room. He stated he told his old boss DSM A about this use of the vacuum by DSP A.</p> <p>When interviewed on 6/12/19 at 2:30 p.m. Direct Support Manager A (DSM A) stated she did not hear of any reports of staff using a</p>			
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	<p>vacuum to block the door and this would be considered abuse. She further stated she would report immediately if this accusation was ever made. She stated DSP B did not mention anything about the vacuum being used by any staff in the home to block the door. She further stated DSP B is her nephew and attempted to talk to her about the incident after he was terminated from the facility. She redirected him that it was an on-going investigation and he should not be talking about it.</p> <p>2. Record review on 6/4/19 revealed Client #2's Incident/Injury Report dated 5/11/19. DSP C completed the Incident Report on 5/12/19. According to report Client #2 was taken to the restroom by DSP D and put on the toilet with a safety belt at 6:15 p.m. According to Client #2's plan, she was supposed to be on the toilet no longer than 15 minutes. At 8:10 p.m. DSP C went looking for Client #2 at snack time and found her still on the toilet from the time DSP D assisted her at 6:15 p.m.</p> <p>When interviewed on 6/11/19 at 2:00 p.m. DSP D stated she made a mistake and forgot about putting Client #2 on the toilet. She stated she felt horrible and did not mean to leave her on</p>			
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	<p>the toilet.</p> <p>When interviewed on 6/5/19 DSP C Stated he found Client #2 sitting on the toilet when he went to find her for snack. He further stated he did not report the incident until the following day when he completed the incident report.</p> <p>Record review on 6/5/19 revealed a facility procedure for Client #2. The Procedure dated 3/7/19 titled Safety Precautions included a section for toileting. The precautions stated Client #2 liked privacy when she uses the toilet. She is more likely to void or have a bowel movement if she is alone. With the appropriate safety measures, she can sit for up to 15 minutes. She has the ability to reposition herself while she sits. The toilet in her room and work has side rails, a padded back, and a seatbelt for her protection.</p> <p>When interviewed on 6/5/19 both the Direct Support Supervisor and Qualified Intellectual Disability Professional confirmed the level of supervision was not followed, the 15 min checks were not done according to policy and DSP D failed to follow the toileting procedure according to Safety Precautions Procedure. They also confirmed the reporting staff in both</p>			
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	<p>incidents failed to report immediately as stated in the facility policy.</p> <p>FACILITY RESPONSE:</p>			
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