

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

Citation Number: 6078					Date: April 19, 2023 Amended 5/15/23
Facility Name: Accura Pleasantville		Survey Dates: March 20, 2023 – March 30, 2023			
Facility Address/City/State/Zip 909 N. State Street Pleasantville, IA 50225					
		CP			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

50.7(1)a(2)	<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 (I,II,III):</p> <p>50.7(1) Of any accident causing major injury</p> <p>a. “Major injury” shall be defined as any injury which:</p> <p>(2) Requires admission to a higher level of care for treatment, other than for observation; or</p> <p>DESCRIPTION:</p> <p>Based on observation, clinical record review, and staff interview the facility failed to report a fall with a major injury for 1 of 1 residents reviewed for a major injury (Resident #33). The facility reported a census of 46 residents.</p> <p>Findings Include:</p> <p>The Minimum Data Set (MDS) Assessment Tool, dated 10/20/22, documented that Resident#33 required supervision assistance of 1 staff member for walking and eating, limited assistance of 1 staff for bed mobility, transfers, toilet use, personal hygiene, and bathing, and extensive assistance of 1 staff for dressing. The MDS listed the resident's Brief Interview for Mental Status</p>	CLASS II	\$500.00	UPON RECEIPT	
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Facility Administrator

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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>(BIMS) score of 0 out of 15, which indicated severely impaired cognition.</p> <p>Untitled Fall Incident Reports revealed the following:</p> <p>On 2/22/22 staff found the resident lying on the floor at the foot of the bed on his right side incontinent of bowel and bladder.</p> <p>On 5/8/22 the resident yelled for staff and was on his buttocks on the floor. The resident sustained 2 skin tears to his arms.</p> <p>On 5/12/22 the resident was sitting on the floor.</p> <p>On 1/17/23 staff found the resident lying on the floor on his left side and he had urinated on the floor and stated he slipped. The resident transferred to the ER for evaluation.</p> <p>A 1/17/23 11:08 a.m. Health Status Note stated the resident had a femur (thigh bone) fracture and admitted to the hospital.</p> <p>A 1/22/23 Hospital Discharge Summary stated the resident admitted to the hospital on 1/17/23</p>				
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	<p>and discharged on 1/22/23. The report documented the resident had a closed intertrochanteric (referring to a part of the femur) fracture of the left hip and underwent a surgical procedure in which he received a hip screw.</p> <p>The Documentation Survey Report V2 for the period of 1/1/23-1/17/23 documented 16 instances where the resident required limited assistance of 1 staff defined as 1-person physical assist with staff providing guided maneuvering of limbs or other non-weight-bearing assistance.</p> <p>A 5/9/22 Care Plan entry directed staff to remind the resident to wait for staff for transfers.</p> <p>An email sent by the Administrator on 3/30/23 at 8:56 a.m. stated the facility did not have a policy related to reporting major injuries to the State Agency but stated they followed the standards of care and/or the regulations.</p> <p>During an interview on 3/29/23 at 10:34 a.m., the Nurse Specialist stated Resident #33 was independent otherwise they would have reported it. She stated they determined who was independent based on the care plan which stated</p>				
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	<p>he was independent.</p> <p>During a phone interview on 3/30/23 at 12:39 p.m., the Regional Reimbursement Specialist stated she did not see an end date for the resident's 5/9/22 fall intervention for the resident to wait for staff in order to transfer. She stated the care plan was not up to date and this intervention was not removed to accurately reflect staff's assistance for the resident.</p> <p>FACILITY RESPONSE</p>			
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58.43(9)	<p>481—58.43(135C) Resident abuse prohibited. Each resident shall receive kind and considerate care at all times and shall be free from mental, physical, sexual, and verbal abuse, exploitation, neglect, and physical injury. Each resident shall be free from chemical and physical restraints except as follows: when authorized in writing by a physician for a specified period of time; when necessary in an emergency to protect the resident from injury to the resident or to others, in which case restraints may be authorized by designated professional personnel who promptly report the action taken to the physician; and in the case of an intellectually disabled individual when ordered in writing by a physician and authorized by a designated qualified intellectual disabilities professional for use during behavior modification sessions. Mechanical supports used in normative situations to achieve proper body position and balance shall not be considered to be a restraint. (II)</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>DESCRIPTION:</p>	CLASS II	\$500.00	UPON RECEIPT
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	<p>Based on clinical record review, policy review, and staff interview, the facility failed to immediately report an allegation of abuse to the State Agency for 1 of 1 residents reviewed for an allegation of abuse (Resident #1). The facility reported a census of 46 residents.</p> <p>Findings Include:</p> <p>1. The Minimum Data Set (MDS) assessment tool, dated 1/12/23, listed diagnoses for Resident #1 which included Alzheimer's disease, anxiety disorder, and depression. The MDS documented the resident completely depended on 1 staff for toilet use, personal hygiene, and bathing, and completely depended on 2 staff for bed mobility and transfers. The MDS listed the resident's Brief Interview for Mental Status (BIMS) score as 0 out of 15, which indicated severely impaired cognition.</p> <p>A Care Plan entry, initiated 5/18/22, revealed the resident had impaired cognitive function/dementia or impaired thought processes related to Alzheimer's and directed staff to reduce any distractions and utilize simple, directive sentences.</p> <p>An undated facility "Self Report" stated on 1/12/23, Staff K Certified Nursing Assistant (CNA) reported that</p>			
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	<p>on 1/11/23 at approximately 3:30 p.m., Staff J CNA took out her vape pen and blew vapor into Resident #1's face during a Hoyer transfer. The report stated the facility notified the State Agency at approximately 5:00 p.m. on 1/12/23.</p> <p>An untitled employee time clock report stated Staff J worked from 5:51 a.m. until 6:39 p.m. on 1/11/23.</p> <p>The facility "Nursing Facility Abuse Prevention, Identification, Investigation, and Reporting Policy", updated 10/19/22, stated all allegations of abuse should be reported to the charge nurse and would be reported to the State Agency not later than 2 hours after the allegation was made.</p> <p>During a phone interview on 3/29/23 at 1:18 p.m., Staff K stated on 1/11/23, she and Staff J transferred Resident #1 from the bed using a Hoyer lift. She stated she (Staff K) was stood by the lift's control panel and Staff K was on the other side of the resident. She stated as the resident was lifted into the air, Staff J pulled out a blue Alto vape pen and blew vapor directly into the resident's face. Staff J stated she felt like it was intentional. Staff K stated she asked Staff J what if the resident was allergic and Staff K stated Staff J stated it was not her problem. Staff K stated this occurred around 4:00 p.m.-4:30</p>			
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	<p>p.m. and stated Staff J worked the rest of her shift until 6:00 p.m. Staff K stated she did not report this that day because the facility had agency management and she felt like they did not really care.</p> <p>During an interview on 3/29/23 at 3:03 p.m., the Administrator stated Staff K was new (at the time of the alleged vape incident) and was concerned with retaliation. She stated Staff K reported it the day after it allegedly occurred. The Administrator stated she would have wanted it reported right away and they would have separated Staff J from residents right away.</p> <p>FACILITY RESPONSE</p>			
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58.43	<p>481—58.43(135C) Resident abuse prohibited. Each resident shall receive kind and considerate care at all times and shall be free from mental, physical, sexual, and verbal abuse, exploitation, neglect, and physical injury. Each resident shall be free from chemical and physical restraints except as follows: when authorized in writing by a physician for a specified period of time; when necessary in an emergency to protect the resident from injury to the resident or to others, in which case restraints may be authorized by designated professional personnel who promptly report the action taken to the physician; and in the case of an intellectually disabled individual when ordered in writing by a physician and authorized by a designated qualified intellectual disabilities professional for use during behavior modification sessions. Mechanical supports used in normative situations to achieve proper body position and balance shall not be considered to be a restraint. (II)</p> <p>DESCRIPTION:</p> <p>Based on clinical record review, policy review, and staff interview, the facility failed to immediately report an allegation of abuse to the State Agency, and failed to separate the staff member from the residents after the incident had</p>	CLASS II	\$500.00	UPON RECEIPT
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	<p>been observed for 1 of 1 residents reviewed for an allegation of abuse (Resident #1). The facility reported a census of 46 residents.</p> <p>Findings Include:</p> <p>1. The Minimum Data Set (MDS) assessment tool, dated 1/12/23, listed diagnoses for Resident #1 which included Alzheimer's disease, anxiety disorder, and depression. The MDS documented the resident completely depended on 1 staff for toilet use, personal hygiene, and bathing, and completely depended on 2 staff for bed mobility and transfers. The MDS listed the resident's Brief Interview for Mental Status (BIMS) score as 0 out of 15, which indicated severely impaired cognition.</p> <p>A Care Plan entry, initiated 5/18/22, stated the resident had impaired cognitive function/dementia or impaired thought processes related to Alzheimer's and directed staff to reduce any distractions and utilize simple, directive sentences.</p> <p>An undated facility "Self Report" stated on 1/12/23, Staff K Certified Nursing Assistant</p>				
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	<p>(CNA) reported that on 1/11/23 at approximately 3:30 p.m., Staff J CNA took out her vape pen and blew vapor into Resident #1's face during a Hoyer transfer. The report stated the facility notified the State Agency at approximately 5:00 p.m. on 1/12/23.</p> <p>An untitled employee time clock report stated Staff J worked from 5:51 a.m. until 6:39 p.m. on 1/11/23.</p> <p>The facility "Nursing Facility Abuse Prevention, Identification, Investigation, and Reporting Policy", updated 10/19/22, stated upon receiving a report of an allegation of abuse, the facility would immediately implement measures to prevent further potential abuse and stated if the allegation involved an employee, the employee would be separated from all residents.</p> <p>During a phone interview on 3/29/23 at 1:18 p.m., Staff K stated on 1/11/23, she and Staff J transferred Resident #1 from the bed using a Hoyer lift. She stated she (Staff K) stood by the lift's control panel and Staff K was on the other side of the resident. She stated as the resident was lifted into the air, Staff J pulled out a blue</p>			
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	<p>Alto vape pen and blew vapor directly into the resident's face. Staff J stated she felt like it was intentional. Staff K stated she asked Staff J what if the resident was allergic and Staff K stated Staff J stated it was not her problem. Staff K stated this occurred around 4:00 p.m.-4:30 p.m. and stated Staff J worked the rest of her shift until 6:00 p.m. Staff K stated she did not report this that day because the facility had agency management and she felt like they did not really care.</p> <p>During an interview on 3/29/23 at 3:03 p.m., the Administrator stated Staff K was new (at the time of the alleged vape incident) and was concerned with retaliation. She stated Staff K reported it the day after it allegedly occurred. The Administrator stated she would have wanted it reported right away and they would have separated Staff J from residents right away.</p> <p>FACILITY RESPONSE</p>			
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