Citation Number: 9058				Date: F Februa	ry 11, 2021
Facility Name: Progress North			Survey I January		
Facility Address/City/State/Zip 815 East 15th Street North Newton, Iowa 50208		LK	#90183-	м	
			"001001		
Rule or Code Section	Nature of Violation		Class	Fine Amount	Correction date
52.2	conditions of partici CFR Part 483, Subpa 480 effective Octobe reference and incorp rules. A copy of thes on request from the Department of Inspe Lucas State Office B 50319. Classification of viol determined by the d in 481-Chapter 56, F enforce a fine to cite This rule is intended Section 135C.2(3). 481—52.2(235E) Perso dependent adult abuse procedure for those per 52.2(2) Reporting susper facilities or programs. a. If a staff member or a report pursuant to thi employee shall immed charge or the person's then notify the	a-64.60(135C) Federal regulations adopted - iditions of participation. Regulations in 42 R Part 483, Subpart D, and Sections 410 to reffective October 3, 1988, are adopted by erence and incorporated as part of these es. A copy of these regulations is available request from the Health Facilities Division, partment of Inspections and Appeals, eas State Office Building, Des Moines, Iowa 19. ssification of violations is I, II, and III, ermined by the division using the provision est-Chapter 56, Fining and Citations," to orce a fine to cite a facility. Is rule is intended to implement Iowa Code ection 135C.2(3). —52.2(235E) Persons who must report endent adult abuse and the reporting cedure for those persons (2) Reporting suspected dependent adult abuse in ities or programs. If a staff member or employee is required to make export pursuant to this rule, the staff member or uployee shall immediately notify the person in arge or the person's designated agent who shall an notify the partment within 24 hours of such notification or		\$500.00	Upon Receipt

Facility Advisorable

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 Number: 9058					Date: F	
					Februa	ry 11, 2021
Facility Name:			Survey I			
Progress North	า		January 4 – 12, 2021			
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	ss/City/State/Zip					
815 East 15th						
Newton, Iowa	1 50208	LK	#90183-	М		
Dula ar				F: A	mount	Commontion
Rule or Code	Notur	e of Violation	Class	Fine A	mount	Correction date
Section	Natur	e or violation	Class			uate
Section						
	Iowa Code section 23	R5E 2(3)(a)	1		T	
		r or employee is required to				
		ant to this section, the staff				
		shall immediately notify				
		or the person's designated				
		notify the department				
	within twenty-four hours of such notification. If					
	the person in charge is the alleged dependent					
		ff member shall directly				
		ne department within				
	twenty-four hours.					
	481—64.33(135C) Alle					
64.33		tions of dependent adult				
		dependent adult abuse shall				
		tigated pursuant to lowa				
	Code chapter 235E an	d 481-Chapter 52 (I,II,III)				
	183 130(4)(3) STAFE T					
	483.420(d)(2) STAFF TREATMENT OF CLIENTS The facility must ensure that all allegations of mistreatment, neglect or abuse as well as injuries of unknown source, are reported immediately to					
W153						
	the administrator or to					
	accordance with State law through established					
	procedures.	-				
	DESCRIPTION:					

Facility Administrator	Date

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Newton, Iowa 50208		LK	#90183-M				
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date	
	facility failed to ensural allegations of abuse. client identified during #90183-M (Client #1) Review of an internal 1/05/21 revealed two Support Professional of the kitchen by his for Saturday, 3/14/20. regarding the incident supervisor didn't see 3/16/20. DSP C also did not report it until conditional review of the revealed the note write She wrote that DSP A #1 to get out of the kitchen, but dropp A held onto Client #1 him out of the kitchen (A distance of 15 to 1) The Human Resource completed the facility	facility investigation on co-workers witnessed Direct (DSP) A drag Client #1 out eet/ankles on the afternoon DSP B wrote a note t for the supervisor, but the the note until Monday, witnessed the incident, but questioned about it on ten on 3/14/20 by DSP B. A yelled and swore at Client the control of the kitchen floor. DSP by his ankles and dragged to the front hall entryway.					

Facility Administrator	Date

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itemton, iowa 30200		LK	#90183-1	VI		
Rule or Code Section	Natur	e of Violation	Class Fine Amount Correction date			Correction date
	interview. In the summary, the HRD noted DSP C corroborated DSP B's written statement and reported DSP A dragged Client #1 by his ankles from the kitchen to an area near the front door of the facility. When asked why she didn't report the incident, DSP C said she thought DSP B reported it. The facility suspended DSP A on 3/16/20 and terminated her employment on 5/07/20. DSP A last worked at the agency on 3/16/20. When interviewed at 4:20 p.m. on 1/05/21, DSP B confirmed she witnessed DSP A drag Client #1 by his feet/ankles from the kitchen to the front entry way. DSP B said DSP A had been yelling and cursing at Client #1 to leave the kitchen. She said Client #1 had been pushing against DSP A in the kitchen and then dropped to the floor. DSP A then dragged Client #1 out of the kitchen. DSP B acknowledged she wrote a note on 3/14/20 and left it for the supervisor. When asked why she didn't immediately report the incident, DSP B said she was a newer staff person and not sure what to do. The supervisor saw the note on the morning of 3/16/20 and called DSP B about it. When interviewed at 3:00 p.m. on 1/06/21, DSP C confirmed she witnessed DSP A drag Client #1					

Facility Administrator

Date

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Rule or Code Section	Natur	e of Violation	Class Fine Amount Correction date			Correction date
	out of the kitchen by his feet/ankles on the afternoon of 3/14/20. DSP C did not report the incident until questioned about it on 3/16/20. A review of the General Event Report (GER) written by DSP B on 3/16/20 regarding the incident on 3/14/20 revealed a follow-up entry by a facility nurse dated 3/16/20. According to the nursing assessment done 3/16/20, Client #1 had three small bruises in a line along the center of his back. A review of DSP A's time sheet revealed she worked at the facility from approximately 6:00 a.m. to 2:00 p.m. on 3/14/20 and 3/15/20 and from approximately 6:00 a.m. to 11:26 a.m. on 3/16/20. DSP A was not immediately separated from working with Client #1 because facility management staff didn't learn of the allegation until the morning of 3/16/20. According to the agency Dependent Adult Abuse policy, staff should immediately report allegations of abuse to the staff person in charge or that person's designated agent. When interviewed on 1/12/21 at 3:20 p.m. the ICF/ID Director confirmed DSP B and DSP C					

Facility Administrator Date

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Code Section	Nature of Violation		Class		date
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of abuse they witness		ed on the afternoon of			
		supervisor/manager was			
always on-call on the					
	should have notified t	ne on-cail supervisor.			
	FACILITY RESPONSE				

Facility Administrator	Date

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