

**Department of Inspections, Appeals, and Licensing  
Health & Safety Division  
Citation**

<b>Citation Number</b> #10980		<b>Report date</b> December 2, 2025		
<b>Facility name</b> Accura Healthcare of Aurelia		<b>Survey dates</b> October 20, 2025 – October 21, 2025		
<b>Facility address</b> 401 West 5 <sup>th</sup> Street				
<b>City</b> Aurelia		<b>DC</b>		
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction Date
<b>58.43(9)</b>	<p><b>481—58.43(135C) Resident abuse prohibited.</b> 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) <b>58.43(9)</b> 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><b>DESCRIPTION</b></p> <p>Based on interview and policy review the facility failed to report allegations of abuse in a timely manner for 1 of 1 resident reviewed. On 5/1/25, several staff members reported that Staff F was</p>	<b>Class II</b>	<b>\$500</b>	<b>Upon Receipt</b>

**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>rude and verbally abusive to Resident #2. They did not have dates and times as to when these incidences occurred. The facility reported a census of 34 residents.</p> <p>Findings include:</p> <p>According to the Minimum Data Set (MDS) dated 7/29/2025, Resident #2 had a Brief Interview for Mental Status (BIMS) score of 3 (severe cognitive deficits.) The resident was totally dependent on staff for toileting, dressing, rolling and transfers. She was always incontinent of urine and bowel, and was impaired on both sides of her upper and lower extremities. Diagnoses for Resident #2 included: heart failure, renal insufficiency and quadriplegia.</p> <p>The Care Plan for Resident #2 dated 4/15/25, showed that she was dependent on staff for activities of daily living related to unspecified intellectual disabilities. Staff were to converse while providing care. Resident #2 previously lived in a home for people with intellectual disabilities, unable to care of herself. She required the assistance of two staff with the Hoyer (mechanical lift) for all transfers. Resident #2 could be verbally aggressive, staff were to monitor behaviors when resident became agitated, intervene before agitation escalated.</p> <p>A facility self-report to the Department of Inspections and Appeals and Licensing (DIAL) showed that on 5/1/25, the Executive Director (ED) had been</p>			

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Facility Administrator

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Date

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	<p>notified that Resident #2 was being verbally abused by Certified Nurse Aide (CNA) Staff F. Staff A, CNA reported that while she and Staff F were transferring Resident #2 with the Hoyer mechanical lift, Staff F said: "I hope this hits you in the head" and "we're not friends, don't call me Buddy." The self-report lacked potential dates that the alleged incident occurred.</p> <p>On 10/20/25 at 2:04 PM Staff B said that Staff F was disrespectful and rough with Resident #2. She did not know the dates that this had occurred and said she knew she should have come forward sooner but she was afraid of retaliation.</p> <p>A written statement dated 5/1/25 at 7:34 PM from Staff H, CNA showed that Staff F was "more mean" to Resident #2 compared to other residents, more aggressive verbally. Staff H couldn't remember when it happened.</p> <p>On 10/21/25 at 11:00 AM, the Director of Nursing (DON) said that they were made aware of the concerns with Staff F, on 5/1/25 but they did not know the date or dates when the incidents occurred. She said the staff that had concerns were educated about the importance of reporting allegations of abuse immediately.</p> <p>10/21/25 1:10 PM the administrator said that the staff had all been educated on the facility abuse</p>			

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	<p>prevention policy and the importance of reporting concerns immediately.</p> <p>A facility policy titled: Nursing Facility Abuse Prevention, Identification, Investigation and Reporting Policy; Mental abuse was defined as use of verbal or nonverbal conduct which caused or potential to cause the resident to experience humiliation, intimidation fear shame agitation or degradation. All allegations of resident abuse, neglect exploitation mistreatment injuries of unknown origin and misappropriations would be reported immediately to the charge nurse. The charge nurse would be responsible for immediately reporting the allegations of abuse to the Administrator, or designated representative. All allegation of resident abuse would be reported to Iowa Department of Inspections and Appeals no later than two hours after the allegations was made.</p> <p><b>FACILITY RESPONSE</b></p>				

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