

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

Citation Number: #6115		Date: June 1, 2023		
Facility Name: Clearview Home		Survey Dates: April 17 – May 2, 2023		
Facility Address/City/State/Zip 406 W. Washington Mount Ayr, IA 50854				
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date

58.43(9)	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) 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) Description: Based on clinical record review, facility policy	I	\$7500 (Held in Suspension)	Upon Receipt
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Facility Administrator

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	review, facility investigation, family interview and staff interview the facility failed to report timely and failed to separate the alleged perpetrator from potential victims during investigation of alleged abuse for 1 of 3 residents reviewed (Resident #2). On 4/24/23 an aide reported she notified management back in December 2022 or January 2023 that a staff member took a video of a resident lying in bed with his brief exposed and posted it to her social media story. On 4/25/23 staff member confirmed she took the video back in December 2022 or January 2023 and management spoke to her at the time of the incident. The aide continued to work with all residents, including resident #2 from the time of the incident until she was terminated on 3/12/23 for taking an inappropriate video. These failures constituted an immediate jeopardy situation. Findings include: The Minimum Data Set (MDS) assessment dated 1/29/23 for Resident #2 documented he scored 7 points on the Brief Interview of Mental Status (BIMS) indicating he had severe cognitive impairment. The MDS documented he was totally dependent on two people for transfers and toileting, was totally dependent on one person for hygiene and required extensive assist of one			
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	person for bed mobility and dressing. The MDS documented he had diagnoses that included coronary artery disease, hypertension, peripheral vascular disease, dementia, Parkinson's disease, depression and psychotic disorder. The Care Plan dated 5/26/22 for Resident #2 documented he had cognitive loss related to his Parkinson's disease. The Care Plan documented he had a history of hallucinations, had periods of lethargy and as more disorganized in his thinking. The facility policy Nursing Facility Abuse Prevention, Identification, Investigation and Reporting Policy dated July 2019 documented the following: -All residents have the right to be free from abuse. This includes prohibiting nursing staff from taking acts that result in person degradation, including the taking and using photographs or recordings in any manner that would demean or humiliate a resident, and prohibits using any form of equipment (e.g. smart phone) to take, keep, or distribute photographs and/or recordings on social media. -All allegations of resident abuse shall be reported to the Iowa Department of Inspections and Appeals not later than two hours after the allegation.			
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	-Should an incident or suspected abuse be reported or observed, the Administrator or designee will investigate the alleged incident. -The Administrator or designee will complete documentation of the allegation of resident abuse and collect supporting documents relative to the alleged incident. This includes assessing the resident for injury and proper notification to the primary care provider and responsible party. -The facility will establish and enforce an environment that encourages individuals to report allegation of abuse without fear or recrimination or intimidation. -Upon receiving a report of an allegation of resident abuse, the facility shall immediately implement measures to prevent further potential abuse of residents from occurring while the facility investigation is in process. If this involves an allegation of abuse by an employee, this will be accomplished by separating the employee accused of abuse from all residents. The Facility Investigation dated 3/11/23 documented it was reported to the Director of Nursing (DON) on 3/11/23 that Staff D had taken a snapchat of a resident and had sent it to a former employee. The report documented the facility placed the aide, Staff D, on suspension until the investigation completed. Staff D stated			
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	she took the snapchat of Resident #2 laying in his bed, partially clothed, and sent it to a coworker at that time. Administration terminated employment with Staff D on 3/12/23. The report documented that Staff D stated the video was of the resident lying in bed pulling the stuffing out of his brief with no caption. The report documented the facility interviewed the other employee and she confirmed it was of the resident lying in bed pulling at the stuffing in his brief. The snapchat deleted after it was viewed so the facility was unable to see it. On 4/19/23 at 10:45 AM the nurse, Staff C, stated Staff D took a video of Resident #2 well over a month ago and management tried to cover it up. She stated the Assistant Administrator was aware of it but did not report it right away and allowed Staff D to continue to work until 3/11/23 when she was let go for another incident. She stated the only reason management reported the video incident that Staff D took is because a family member of another resident found out about it and threatened to pull her mom out if they continued to let staff work at the facility that would video a resident's privates. She stated Staff D sent the video to former employee Staff E and that she was aware of it because Staff E told her about it. She stated Staff E told her that the			
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	Assistant Administrator asked her to lie about when it happened if the state called her. On 4/24/23 at 12:15 PM the aide Staff A stated she never witnessed Staff D using her phone to take video of a resident but she heard through talk at the facility that Staff D used her phone and took video of Resident #2 and his privates was in the video. She stated she heard it was posted on her story and she also heard it was sent to another employee but she stated she never saw it. She stated this incident happened 2-3 months prior to 3/11/23. She stated the facility did education with them early this month about HIPPA and not using their phones while working. On 4/24/23 at 12:49 PM the aide, Staff B, stated she never saw any video of the resident but she heard staff at the facility talking about it. She stated she heard that Staff D took a video of the resident in bed in his brief and that she sent it to her snapchat story. She stated she started at the facility on 3/9/23 and that it had happened prior to that because that is when she heard about it. On 4/24/23 at 1:43 PM the Social Service Director (SSD) stated she gives pamphlets to families and residents on admit that addressed HIPPA and their privacy rights. She stated on hire			
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	she was trained about abuse, privacy and confidentiality and the facility also provides an annual in-service about it. She stated the staff were recently re-educated they are not to have their cell phones on them while working. She stated the second weekend in March is when she was notified that Staff D took video of the resident. She stated the only thing she was involved in was calling the wife to inform her and then following up with the resident for any behaviors. She stated the wife was upset but understood that things happen and that kids can be stupid. On 4/24/23 at 2:57 PM when questioned Staff E and informed her it was reported that she was sent a video from Staff D of the resident in his brief, she got upset and stated that Staff D did not send her a video that Staff D put it on her snapchat story and that is when she saw it. Staff E stated she reported it to the Assistant Administrator the next morning. She stated she does not have the video. She stated she knows it happened in December or January because she has not worked there since then and it happened while she was an employee. On 4/25/23 at 8:26 AM the aide, Staff D stated when she walked into Resident #2's room to			
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	check on him she found him in bed and he had torn up his brief. She stated she took a video of it because she thought it was funny and was going to share it with his wife. She stated after taking the video she put the phone in her pocket to take care of the resident and her phone accidentally uploaded the video to her snapchat story. She stated when she noticed the video uploaded she immediately deleted the video. She stated this happened back in December or January and that management was aware of it. She stated the Assistant Administrator pulled her into his office at that time, talked to her about it and told her not to do it again. She stated it took him until March to fire her. On 4/25/23 at 10:31 AM the SSD stated if she ever saw a resident being abused she would separate the resident from the person abusing them to make sure they are safe and then she would let the charge nurse know right away. She stated she would also make sure management was aware. On 4/25/23 at 10:35 AM the aide, Staff F, stated she has been an aide at the facility for almost a year. She stated she was trained on hire of abuse and if she ever saw abuse she would separate the resident to make sure they are safe and then			
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	she would report it to her nurse immediately. She stated taking video of a resident can be seen as abuse and that they have been taught by the facility they are not supposed to use their phone to take pictures or video of residents and they are not to have their phones on them. On 4/25/23 at 10:42 AM the aide, Staff G, stated if she were to see any form of abuse she would separate them right away and then tell her charge nurse so it can be investigated. She stated they have been taught not to have their phones on them while working. She stated if she saw a staff member taking video of a resident she would tell them to stop right away and report it to her nurse. On 4/25/23 at 11:52 AM the DON stated all staff are trained on hire and annually regarding abuse, what to do and when to report it. She stated if staff see any form of abuse they are expected to separate the resident to make sure they are safe, report it right away so she can start an investigation and report it to the State Agency within two hours. On 4/25/23 at 1:55 PM when asked the Assistant Administrator, when he became aware of Staff D taking video of Resident #2 he stated he was aware prior to 3/11/23. When informed it was			
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reported that he was informed back in December 2022 or January 2023 he agreed and stated he would check on the date specifically. He stated when Staff E reported it he immediately called Staff D into his office. He stated Staff D denied it and there was no video to prove it so he thought it was teenage drama between the two aides and didn't know if it really happened. He stated they have already done a mini-education with all the aides on phone use. He stated when another staff took pictures of a different resident on 3/11/23 this incident was brought up again so he pulled Staff D back in and she admitted to taking the video. He stated that is when he decided to terminate her. On 4/25/23 at 2:10 PM the Assistant Administrator stated he looked back through his phone and 1/19/23 is when he found out about Staff D taking the video of Resident #2. Facility Response:				
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