

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

Citation Number: 6785	Amended Citation – Fine amount reduced by 35% to \$1,950.00 on April 27, 2018. Pursuant to Iowa Code Section 135C.43A	Date: April 12, 2018
Facility Name: Risen Sun Christian Village	Survey Dates: March 13-18 & March 20-21, 2018	
Facility Address/City/State/Zip 3000 Risen Son Blvd Council Bluffs, 51503	MW	
Rule or Code Section	Nature of Violation	Class Fine Amount Correction date

58.19(2)j	<p>Medication & Treatment <i>j.</i> Provision of accurate assessment and timely intervention for all residents who have an onset of adverse symptoms which represent a change in mental, emotional, or physical condition. (I, II, III)</p> <p>DESCRIPTION:</p> <p>Based on clinical record review, observation, staff interviews and facility policy review, the facility failed to always provide assessment and intervention for a resident with low urine output and dark urine for one of two residents sampled with urinary catheters (Resident #4). The facility identified a census of 91 current residents.</p> <p>Findings include:</p> <p>1. According to the MDS (minimum data set) assessment dated 1/5/18, Resident #4 had diagnoses that included atrial fibrillation, coronary artery disease, heart failure, high blood pressure, arthritis and hip fracture. The MDS identified the resident had a BIMs (brief interview for mental status) score of 11 which indicated moderate cognitive impairment. According to the MDS, the resident required the assistance of two with bed</p>	I	\$3000	UPON RECEIPT
------------------	---	----------	---------------	---------------------

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 Iowa Code section 135C.43A (2013).

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

Citation Number: 6785	Amended Citation – Fine amount reduced by 35% to \$1,950.00 on April 27, 2018. Pursuant to Iowa Code Section 135C.43A	Date: April 12, 2018
Facility Name: Risen Sun Christian Village	Survey Dates: March 13-18 & March 20-21, 2018	
Facility Address/City/State/Zip 3000 Risen Son Blvd Council Bluffs, 51503	MW	
Rule or Code Section	Nature of Violation	Class
		Fine Amount
		Correction date

	<p>mobility, transfers, toilet use and bathing, The assessment documented Resident #4 required an indwelling catheter for urination.</p> <p>The resident's care plan focus area for self care deficiency, dated 1/3/18, instructed staff to provide Foley (urinary catheter) cares every shift and as needed. Under the catheter focus area, dated 1/10/18, the care plan directed to check the catheter tubing for kinks each shift and monitor for signs/symptoms of discomfort due to the catheter. The catheter interventions also instructed to monitor/record/report to the medical doctor signs/symptoms of urinary tract infection: pain, burning, blood tinged urine, cloudiness, no output, deepening of urine color, increased pulse, temperature, urinary frequency, foul smelling urine, fever, chills, altered mental status, change in behavior and/or change in eating patterns.</p> <p>The Order Summary Report dated 1/8/18 directed staff to monitor the resident's Foley catheter site every shift for signs and symptoms of infection. If infection noted, document and notify the physician.</p> <p>Review of the Intake/Output record dated 12/27/17 through 1/11/18 revealed the resident had the following outputs from her urinary catheter:</p>			
--	--	--	--	--

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 Iowa Code section 135C.43A (2013).

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

Citation Number: 6785	Amended Citation – Fine amount reduced by 35% to \$1,950.00 on April 27, 2018. Pursuant to Iowa Code Section 135C.43A	Date: April 12, 2018
Facility Name: Risen Sun Christian Village	Survey Dates: March 13-18 & March 20-21, 2018	
Facility Address/City/State/Zip 3000 Risen Son Blvd Council Bluffs, 51503	MW	
Rule or Code Section	Nature of Violation	Class Fine Amount Correction date

	<p>a. 1/10/18 at 4:24 AM - 120 cc (cubic centimeters); b. 1/10/18 at 1:27 PM - 75 cc; c. 1/10/18 at 9:09 PM - 50 cc; d. 1/11/18 at 3:40 AM - 60 cc; e. 1/11/18 at 4:15 AM - 300 cc; f. 1/11/18 at 11:19 AM - 100 cc.</p> <p>Review of the Skilled Note dated 1/11/18 at 1:36 AM revealed the resident had a Foley indwelling catheter patent and draining dark tea colored urine. Staff offered fluids offered and the resident took minute sips. The note also identified the resident seemed to want to do less and less; she just wanted to stay in bed.</p> <p>Review of the Progress Notes dated 1/11/18 at 7:52 AM revealed the resident presented with a change in condition in the morning of 1/10/18. The change in condition related to bleeding and staff reported the change in condition to the resident's physician at 8:10 AM. Staff notified the resident's family/healthcare agent on 1/11/18 at 8:15 AM.</p> <p>The Progress Note dated 1/11/18 at 2:11 PM recorded Resident #4 admitted to the hospital for acute kidney injury, rapid fibrillation and hematuria. The resident's record revealed no further assessment of urine output/catheter</p>			
--	--	--	--	--

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 Iowa Code section 135C.43A (2013).

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

Citation Number: 6785	Amended Citation – Fine amount reduced by 35% to \$1,950.00 on April 27, 2018. Pursuant to Iowa Code Section 135C.43A	Date: April 12, 2018
Facility Name: Risen Sun Christian Village	Survey Dates: March 13-18 & March 20-21, 2018	
Facility Address/City/State/Zip 3000 Risen Son Blvd Council Bluffs, 51503	MW	
Rule or Code Section	Nature of Violation	Class Fine Amount Correction date

	<p>patency.</p> <p>Review of the Hospital Discharge Documents dated 1/16/18 revealed the resident had been lethargic for 2 days and sleeping most of the time and was noted to be very sweaty in her bed. She then developed some hematuria (blood in the urine) which was seen in her Foley catheter. She had continued complaints of pain and describes the pain as "all over". Emergency department evaluation included a Foley catheter exchange with findings of several large blood clots which once passed resulted in 1200 cc of urine drained from the bladder. She was also noted to be in atrial fibrillation with a resting ventricular rate 150's. She admitted with urinary tract infection with ceftriaxone (antibiotic), gross hematuria, urinary retention and atrial fibrillation. The hematuria cleared and the clinician suspected hematuria secondary to UTI (urinary tract infection) with gross over distention of the resident's bladder.</p> <p>During an interview with Staff A, CMA (certified medication assistant) on 3/20/18 at 1:20 PM, she stated remembered the resident had a small output of dark colored urine the day before she went to the hospital. She stated she told the nurse but could not remember which one. She stated she did not see any blood in the urine and</p>			
--	---	--	--	--

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 Iowa Code section 135C.43A (2013).

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

Citation Number: 6785	Amended Citation – Fine amount reduced by 35% to \$1,950.00 on April 27, 2018. Pursuant to Iowa Code Section 135C.43A	Date: April 12, 2018
Facility Name: Risen Sun Christian Village	Survey Dates: March 13-18 & March 20-21, 2018	
Facility Address/City/State/Zip 3000 Risen Son Blvd Council Bluffs, 51503	MW	
Rule or Code Section	Nature of Violation	Class Fine Amount Correction date

	<p>the resident did not complain of pain.</p> <p>During an interview with Staff G, CNA (certified nursing assistant) on 3/20/18 at 1:40 PM she stated Resident #4 had brown urine towards the end of her stay. She stated the resident had been going downhill but she did not recall the resident complaining of pain. She stated she did not tell the nurse about the brown urine because the regular CNAs on her hall would have told the nurse.</p> <p>During an interview with Staff E, RN (registered nurse) on 3/20/18 at 2:00 PM she stated it had not been reported to her that Resident #4 had the low outputs on 1/10/18; this was the first she'd heard of it. She further stated they would irrigate the resident's catheter or call the physician if there had been no order related to the concern.</p> <p>During an interview with Staff H, LPN (licensed practical nurse) on 3/21/18 at 2:20 PM, she stated she clocked in at 4:00 AM on 1/11/18 and worked CNA duties. She completed rounds with the resident at approximately 4:00 PM and emptied approximately 200 to 300 cc of extremely dark and blood tinged urine. She asked the night nurse if she had seen the urine and she said yes and it had been that way due to the catheter had been changed out the other day. Staff H stated it had</p>			
--	--	--	--	--

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 Iowa Code section 135C.43A (2013).

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

Citation Number: 6785	Amended Citation – Fine amount reduced by 35% to \$1,950.00 on April 27, 2018. Pursuant to Iowa Code Section 135C.43A	Date: April 12, 2018
Facility Name: Risen Sun Christian Village	Survey Dates: March 13-18 & March 20-21, 2018	
Facility Address/City/State/Zip 3000 Risen Son Blvd Council Bluffs, 51503	MW	
Rule or Code Section	Nature of Violation	Class
		Fine Amount
		Correction date

	<p>not been that color previously and she told the nurse she didn't think it was right. Staff H finished rounds and received nursing report and instructed the day CNAs to watch the resident closely. She went to the resident's room, assessed her and took her vital signs. The resident stated her belly hurt a little bit; she had hyperactive bowel sounds in the upper quadrants and normal bowel sounds in the lower quadrants. The resident also had approximately 400 cc of real red urine at that time. She called the physician and he gave an order to send the resident to the hospital. Approximately 5 to 6 hours later, an urologist called and reported the catheter had been empty when at the hospital and they put in a new catheter and returned a large amount of urine. Staff H further stated it had not been reported to her the resident had a low output the day before.</p> <p>Review of the facility's Incontinence and Catheter Management policy dated 4/2017 revealed that a resident who is incontinent of bladder receives appropriate treatment and services to prevent urinary tract infections and to restore as much normal bladder function as possible.</p> <p>FACILITY RESPONSE:</p>			
--	---	--	--	--

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 Iowa Code section 135C.43A (2013).

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

Citation Number: 6785		Amended Citation – Fine amount reduced by 35% to \$1,950.00 on April 27, 2018. Pursuant to Iowa Code Section 135C.43A		Date: April 12, 2018	
Facility Name: Risen Sun Christian Village		Survey Dates: March 13-18 & March 20-21, 2018			
Facility Address/City/State/Zip 3000 Risen Son Blvd Council Bluffs, 51503					
		MW			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

--	--	--	--	--	--

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 Iowa Code section 135C.43A (2013).