

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

Citation Number: 9072		Date: 3-23-21		
Facility Name: English Valley Nursing Care Center		Survey Dates: 02/22/21-03/03/21		
Facility Address/City/State/Zip 150 West Washington St North English, IA 52316		VV		
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date

50.7	<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): 50.7(1) Of any accident causing major injury.</p> <p>DESCRIPTION:</p> <p>Based on record review and staff interviews, the facility failed to report accidents with major injuries that required medical intervention for 1 of 5 residents reviewed for falls with injury (Resident #35). The facility reported a census of 40 residents.</p> <p>FINDINGS INCLUDE:</p> <p>Review of the MDS (Minimum Data Set) assessment dated 8/24/20 identified Resident #35 had diagnoses of hypertension, hyperlipidemia, depression, atrioventricular block, presence of a cardiac pacemaker, other symptoms and signs of cognitive functions and awareness, and history of falling. The BIMS (Brief Interview for Mental Status) was a score of 13 indicating intact cognition. The MDS documented Resident #35 required extensive assistance of one staff with transfers, walking in room, and walking in corridor. The MDS showed Resident #35 fell once</p>	II	\$500	Upon Receipt
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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).

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	<p>without injury and two or more times resulting in a non-major injury.</p> <p>Review of the Nursing Assessment and Review dated 8/24/20 revealed Resident #35 used his walker independently in his room and would call for assistance if needed. The review also stated with recent falls, two with injury and one without injury over the past quarter, staff had been helping more with ambulation.</p> <p>The Care Plan dated 6/4/20 included interventions that Resident #35 was able to use the walker in his room by himself and had a walking program for walk to dine with assist of 1 and walker. An intervention dated 8/28/20 stated PT (Physical Therapy) had started working with Resident #35 again.</p> <p>A Progress Note dated 10/26/20 6:08 p.m. revealed Resident #35 attempted to sit down when next to a recliner in his room after being assisted to walk from the dining room after supper. Resident #35 required cueing, redirection, and a gait belt during ambulation and transfer.</p> <p>A Progress Note dated 10/29/20 at 6:00 a.m. revealed staff observed Resident #35 lying on the floor in his room in front on his right side. Injuries documented at the time included a left elbow skin tear, right elbow bruise with slit in the middle, right index finger slit, right wrist skin tear with bruising, and a right hand bruise.</p>			
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	<p>The facility Incident/Accident Report dated 10/29/20 at 6:10 a.m. completed by Staff A, LPN (Licensed Practical Nurse), stated Resident #35 walked past his recliner without his walker, and lost his balance when turning to sit in a recliner.</p> <p>Review of a Progress Note dated 10/29/20 at 4:34 p.m. by Staff F, RN (Registered Nurse); documented Resident #35 reported extreme pain to the posterior right hip and could hardly bear weight with a transfer. Staff F received orders to send Resident #35 to the ED (Emergency Department).</p> <p>The Transfer/Discharge Report dated 10/29/20, signed by Staff F documented Resident #35 as usually assisted by 1 staff with FWW (front wheeled walker) with ambulation.</p> <p>The Operative Report from the admitting hospital with date of service listed as 10/30/20 provided pre and post-operative diagnoses of displaced right femoral neck fracture (hip fracture) following right hip cemented hemiarthroplasty (surgical procedure to replace half of the hip joint).</p> <p>Review of the clinical record revealed no Major Injury Report.</p> <p>On 2/25/21 at 1:35 p.m., Staff F reported assisting Resident #35 with a transfer or ambulation in the afternoon on 10/29/20. Staff F stated Resident #35 could hardly bear weight and so she requested an order to send him to the emergency department. Staff</p>			
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	<p>F could not recall if Resident #35 needed assistance with transfers or ambulation in his room prior to 10/29/20.</p> <p>During an interview on 3/1/21 at 12:20 p.m., Staff A reported assessing range of motion prior to assisting another nurse with transferring Resident #35 from the floor to a wheelchair following the fall on 10/29/20. Staff A stated Resident #35 moved all extremities and transferred without difficulty or reports of discomfort. Staff A could not recall if Resident #35 needed assistance with transfers or ambulation in his room at the time of the fall since he had "gone back and forth".</p> <p>On 2/24/21 at 3:50 p.m., the Administrator stated there had been no reports to DIA (Department of Inspections and Appeals) since February 2020. The Administrator stated the DON (Director of Nursing) submitted the reports to DIA and denied knowledge of any reportable incidents in the past year to include falls with fractures.</p> <p>During an interview on 3/2/21 at 8:43 a.m., the DON stated she believed Resident #35 was independent in his room and assisted outside of his room at the time of the fall on 10/29/20. The DON stated no knowledge of a report submitted to DIA. The DON reported not being in the role of DON at the time of the 10/29/20 fall. The DON confirmed the facility did not have a major injury report for this fall with fracture.</p>			
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135C.33	135C.33 Employees and certified nurse aide trainees — child or dependent adult abuse information and criminal record check options — evaluations — application to other providers — penalty.	II	\$500	Upon Receipt
58.11(3)	<p><i>58.11(3) Employee criminal record checks, child abuse checks and dependent adult abuse checks and employment of individuals who have committed a crime or have a founded abuse. The facility shall comply with the requirements found in Iowa Code section <u>135C.33</u> and rule <u>481—50.9(135C)</u> related to completion of criminal record checks, child abuse checks, and dependent adult abuse checks and to employment of individuals who have committed a crime or have a founded abuse. (I, II, III)</i></p> <p>[ARC 0903C, IAB 8/7/13, effective 9/11/13; ARC 5421C, IAB 2/10/21, effective 3/17/21]</p> <p>DESCRIPTION:</p> <p>Based on record review and interview, the facility failed to ensure the completion of a criminal background checks for 1 of 4 newly hired employees (Staff B). The facility reported a census of 40 residents.</p>			

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	<p>FINDINGS INCLUDE:</p> <p>Record review of facility New Hire list, Staff B had a hire date of 06/25/20.</p> <p>Review of a Single Contact License and Background Check(SING), dated 06/22/20, stated further research required and directed staff to await the DCI's(Division of Criminal Investigation) final response.</p> <p>Review of DCI Iowa Record Check Request Form S, dated 06/24/20, showed Criminal History record report and Iowa Criminal History report listing a conviction for Staff B.</p> <p>Review of personnel file for Staff B did not contain a DHS (Department of Human Services) Record Check Evaluation with permission to work documentation.</p> <p>Review of facility policy "Abuse Prevention, Identification, Investigation, and Reporting Policy", revised 12/22/16, stated the facility would conduct an Iowa criminal record check on all prospective employees.</p> <p>During an interview on 03/02/21 at 11:24 a.m., the Administrator stated the former Administrator completed Staff B's record check and stated she could not find an evaluation or permission to work from DHS in Staff B's file.</p>			
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	<p>During an interview on 03/02/21 at 12:01 p.m., the Administrator stated the facility would suspend Staff B pending the completion of a new SING check and Record Check Evaluation.</p> <p style="text-align: center;"><u>FACILITY RESPONSE:</u></p>			
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