Citation Numb #6206	er:				Date: August	17, 2023
Facility Name: Caring Acres N	ursing and Rehab		Survey I July 25,		August 3,	2023
Facility Address 1000 Hillcrest D Anita, Iowa 500		LG				
Rule or Code Section	Nature	e of Violation	Class	Fine A	Amount	Correction date
58.43(2)	resident shall receive kil care at all times and sha physical, sexual, and veneglect, and physical infree from chemical and follows: when authorized specified period of time; emergency to protect the resident or to others, in be authorized by design who promptly report the physician; and in the callindividual when ordered and authorized by a design disability professional formodification sessions. In normative situations to a position and balance she restraint. (II) 58.43(2) Physical abuse corporal punishment and punishment. (II) DESCRIPTION: Based on clinical record resident interview, staff review the facility failed	all be free from mental, erbal abuse, exploitation, jury. Each resident shall be physical restraints except as d in writing by a physician for a when necessary in an e resident from injury to the which case restraints may lated professional personnel action taken to the se of an intellectually disabled in writing by a physician signated qualified intellectual or use during behavior Mechanical supports used in achieve proper body all not be considered to be a experience includes, but is not limited to, d the use of restraints as	I	\$8500. (Held i Suspe		Upon Receipt
						Page 1 of 3

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).

Date

Citation Number #6206	er:		Date: August 17, 2023			17, 2023
Facility Name: Caring Acres No	ursing and Rehab		Survey I July 25, 2		August 3, 2	2023
Facility Address 1000 Hillcrest D Anita, Iowa 5000		LG				
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date
	Resident #4 revealed a Status (BIMS) score of a severely impaired cogni diagnoses to include and The Care Plan for Residual Commented the resider (having multiple episode expectations. The Care -Anticipate and meet the -Caregivers to provide conteraction, attention, storagivers to provide conteraction attention to provide content to provid	Set (MDS) dated 6/5/23 for Brief Interview of Mental 4 out of 15 which indicated tion. The MDS documented a nnesia. Ident #4 revised on 2/6/23 at has a behavior problem es) related to unrealistic Plan directed staff as follows: e resident needs. Exportunity for positive op and interact as passes by des and attempt to determine 19/23 documented the resident verbally aggressive related to usion. The Care Plan directed				
	The Care Plan lacked a behaviors. The Progress Note for F following:	ny indication of sexual Resident #4 documented the I the Director of Nursing (DON)				

Page 2 of 37

Facility Administrator Date

Facility		/ lagast i	7, 2023
	Survey Dates: July 25, 2023 – August 3, 2023		
Facility Address/City/State/Zip 1000 Hillcrest Drive Anita, Iowa 50020			
Rule or Code Nature of Violation Section	Class	ine Amount	Correction date
went to a female resident room to inform her that it was lunch time. Upon entering the room, Resident #4 was leaning over female residents' bed, groping the female's breasts and kissing her intimately. The DON informed the resident to leave her room and asked the female resident if she was okay and if she had consented to that encounter. The female did nod her head yes. The DON went to residents' room and educated him on the importance of consent and explained that some people may not be able to make proper decisions for themselves. Fax sent to Primary Care Provider (PCP) to update. Residents daughter also notified of encounter. In an interview on 7/26/23 at 11:18 AM, the resident's daughter reported that the resident was accused of touching a female resident, the resident has always been lovey in behavior. She stated the facility hasn't informed her that anything has happened between this resident and other resident since the new company took over in 11/22. In an interview on 7/26/23 at 2:31 PM, Staff A, CNA, reported that the resident's nickname among staff was "Captain McFeely Pants", because he can get inappropriate with staff. She stated the staff remind him to behave and he hasn't been an issue since before the beginning of May. She added before that he was touchy feely. She stated he would sit on the couch and grope female residents but he never would go past first base. She stated he would touch them outside of their clothes and would touch their breasts outside of their clothes. The aide stated she remembered him with Resident #3 touching her at			Page 3 of 3

Facility Administrator Date

Citation Number: #6206					Date: August	17, 2023
Facility Name: Caring Acres Nursing and Rehab			Survey Dates: July 25, 2023 – August 3, 2023			2023
Facility Address/City/State/Zip 1000 Hillcrest Drive Anita, Iowa 50020		LG				
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date
In an interview of she observed the inappropriate between residents were of separated and residents were and that their far residents to engage reported that she about the incider. 2. The MDS datage resident had shop problems, had see daily decision madisorganized thire. The MDS document traumatic brain of schizophrenia. The Care Plan redocumented the elopement related Care Plan directors. Ensure a safe datendency to between the selopement of the elopement related a tendency to between the selopement related tendency to between the selopement related tendency to be selopement related tendency tendenc	n 7/26/e 2 resinavior onfused in set talked on 1/e ed 5/8/rt term everely aking be talking be talki	23 for Resident #5 revealed the and long-term memory impaired cognitive skills for and had inattention and ehavior present that fluctuates. diagnoses to include nontion, Alzheimer's disease, and on 7/20/23 for Resident #5 at risk for wandering and paired safety awareness. The				
escapist; looking exercise?	for sor	mething; or need more				Page 4 of 3

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).

Citation Numb #6206	er:		Date: August 17, 2023			
Facility Name: Caring Acres N	ursing and Rehab		Survey D July 25, 2		August 3, 2	2023
Facility Address 1000 Hillcrest D Anita, Iowa 500		LG				
Rule or Code Section	Nature	e of Violation	Class	Fine A	Amount	Correction date
	times. Document wanded diversion interventions. The Care Plan revised of documented the resider sitting on the floor and grooms related to cognitive directed staff as follows. Anticipate and meet the Caregivers to provide of interaction, attention, and passes by. Psyche referral as need medication management. The Care Plan lacked a behavior. The Progress Notes for following: On 7/17/23 at 10:29 PM resident's room. CNA rehad walked in on reside an inappropriate act. CN separate residents and resident out of the room. Resident #5 until nurse assessment. Male resident dand this nurse went back assessment completed completed. resident staff she was okay with what didn't mind it. Skin asses	e resident's needs. Opportunities for positive and to stop and interact as ded for behavior and at. Any indication of sexual the resident documented the				Page 5 of 3

Facility Administrator Date

Citation Numb #6206	er:				Date: August	17, 2023
Facility Name: Caring Acres N	ursing and Rehab		Survey Dates: July 25, 2023 – August 3, 2023			2023
Facility Addre 1000 Hillcrest I Anita, Iowa 500		LG				
Rule or Code Section	Natur	e of Violation	Class	Fine A	mount	Correction date
	showing any obvious significance of the resident signed by a documented the follower staff report, another room, took off his clother (Sexual Assault Nurse Edenied sexual intercours to stop, then CNA walke other resident to leave repatient has no complair -Description of Assault: stated he wanted to do here. He took his and recoursed at another facility and was patient has no complair -Description of Assault: stated he wanted to do here. He took his and hoccurred at another facility and resident signed by a state of the condition of the complaint of the condition of the complaint of the condition of the conditi	agitated. She was not verbally a Half hour checks completed insure safety. Resident found to see and redirected back to her istrator, DON and ADON and at approx. 10:21 PM after see. DON and ADON spoke with 2 AM. DON updated brother on and a male resident. Brother acility to do what they think is sister is okay. Brother aware sident to be seen at local per orders from the resident's served at 9:39 AM. Expartment) Provider Note for a physician on 7/18/23 at 11:32 owing: ar resident went into patient's see, and laid on top of her. SANE Examiner) nurse reports patient see. She stated patient told him and by room. CNA reports telling oom. Per CNA report, he left sent to a different hallway.				Page 6 of 3

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).

Date

Citation Number #6206	r:				Date: August 1	17, 2023
Facility Name: Caring Acres Nur	rsing and Rehab		Survey Dates: July 25, 2023 – August 3, 2023			2023
Facility Address 1000 Hillcrest Dri Anita, Iowa 50020	ve	LG				
Rule or Code Section	Nature	e of Violation	Class	Fine A	Amount	Correction date
	penetration, patient den orally, anally). Staff CNA in and found male on to male was undressed and down. CNA told male to Male got up, left, dressed different hallway in facilicalled and reported incidenforcement to reportActivities Following the told him get off, get off." said get outta there. He room." Patient was broughterviewed by SANE R Brother called and consexam done and to defer-Assessment of Generalskin assessment perforr	I Appearance Note Full body med with unremarkable erved to be clean and free from				Page 7 of 3 7
Facility	Administrator	Dat				Ü

Rule or Code Section Nature of Violation Class Fine Amount Correction date 88000.00 (Held in Suspension) Receipt Receipt Suspension) Lead in Suspension Due Upon Receipt Re	Citation Number: #6206 Facility Name: Caring Acres Nursing and Rehab Facility Address/City/State/Zip 1000 Hillcrest Drive Anita, Iowa 50020		LG	Date: August 17, 2023 Survey Dates: July 25, 2023 – August 3, 2023 Fine Amount Correct			
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 lowa Code chapter 235E	Code	Nature	e of Violation	Class	Fine A	Amount	
	481—58.43(1356) resident shall recare at all times physical, sexual, neglect, and phy free from chemic follows: when au specified period emergency to prove resident or to othe be authorized by who promptly repphysician; and in individual when and authorized by disabilities profes modification session and balarestraint. (II) 58.43(9) Allegations of de and investigated	ceive kii and sha and versical injustion in and part the case of time; of the case ordered by a despendent to a ance sha cons of cepender pursua	and and considerate all be free from mental, bribal abuse, exploitation, jury. Each resident shall be physical restraints except as d in writing by a physician for a when necessary in an e resident from injury to the which case restraints may lated professional personnel action taken to the se of an intellectually disabled in writing by a physician signated qualified intellectual for use during behavior Mechanical supports used in achieve proper body all not be considered to be a dependent adult abuse. In adult abuse shall be reported and to lowa Code chapter 235E	1	(Held i	'n	

Facility Administrator

Date

Facility Name: Caring Acres Nursing and Rehab Facility Address/City/State/Zip 1000 Hillcrest Drive Anita, Iowa 50020 Rule or Code Section DESCRIPTION: Based on clinical record review, family interview, resident interview, staff interview and facility policy review the facility failed to protect residents from alleged sexual abuse for 2 of 5 residents reviewed (Resident #4 and #5). The facility reported a census of 32 residents. Findings include: 1. The Minimum Data Set (MDS) dated 6/5/23 for Resident #4 revealed a Brief Interview of Mental Status (BIMS) score of 4 out of 15 which indicated severely impaired cognition. The MDS documented a diagnoses to include amnesia. The Care Plan for Resident #4 revised on 2/6/23 documented the resident has a behavior problem (having multiple episodes) related to unrealistic expectations. The Care Plan directed staff as follows: -Anticipate and meet the resident needsCaregivers to provide opportunity for positive interaction, attention, stop and interact as passes byMonitor behavior episodes and attempt to determine underlying cause. The Care Plan dated 6/9/23 documented the resident has the potential to be verbally aggressive related to the aging process/confusion. The Care Plan directed staff as follows:	Citation Number: #6206		Date: August 17, 2023		
Rule or Code Section DESCRIPTION: Based on clinical record review, family interview, resident interview, staff interview and facility policy review the facility falled to protect residents from alleged sexual abuse for 2 of 5 residents reviewed (Resident #4 and #5). The facility reported a census of 32 residents. Findings include: 1. The Minimum Data Set (MDS) dated 6/5/23 for Resident #4 revealed a Brief Interview of Mental Status (BIMS) score of 4 out of 15 which indicated severely impaired cognition. The MDS documented a diagnoses to include amnesia. The Care Plan for Resident #4 revised on 2/6/23 documented the resident has a behavior problem (having multiple episodes) related to unrealistic expectations. The Care Plan directed staff as follows: -Anticipate and meet the resident needs. -Caregivers to provide opportunity for positive interaction, attention, stop and interact as passes by. -Monitor behavior episodes and attempt to determine underlying cause. The Care Plan dated 6/9/23 documented the resident has the potential to be verbally aggressive related to the aging process/confusion. The Care Plan directed					
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	Based on clinical record resident interview, staff in review the facility failed alleged sexual abuse for (Resident #4 and #5). The facility reported a control of the facility reported a con	interview and facility policy to protect residents from r 2 of 5 residents reviewed ensus of 32 residents. Set (MDS) dated 6/5/23 for Brief Interview of Mental 4 out of 15 which indicated tion. The MDS documented a nnesia. Jent #4 revised on 2/6/23 at has a behavior problem es) related to unrealistic Plan directed staff as follows: e resident needs. Exportunity for positive op and interact as passes by des and attempt to determine 19/23 documented the resident rerbally aggressive related to			

Facility Administrator Date

Citation Number: #6206			Date: August	17, 2023	
Facility Name: Caring Acres Nursing and Rehab		Survey Dat July 25, 202	tes: 23 – August 3, 2	2023	
Facility Address/City/State/Zip 1000 Hillcrest Drive Anita, Iowa 50020	LG				
Rule or		Fine Amount Correcti			
	e of Violation	Class	ine Amount	date	
care and activities. The Care Plan lacked a behaviors. The Progress Note for following: On 1/24/23 at 12:12 PN went to a female reside was lunch time. Upon e was leaning over femal female's breasts and ki informed the resident to female resident if she was consented to that encount head yes. The DON we educated him on the imexplained that some perproper decisions for the Care Provider (PCP) to also notified of encount On 1/30/23 at 9:12 PM increase dose of Name symptoms of any adverbehaviors noted tonight from room 206 (Reside her shirt-this nurse septaking his pill-why does about blanket-staff wen it stood shouting and stand she got back upstairs won 3/23/23 at 2:42 PM ADON, SSD (Social Se	Resident #4 documented the If the Director of Nursing (DON) and room to inform her that it entering the room, Resident #4 e residents' bed, groping the assing her intimately. The DON to leave her room and asked the vas okay and if she had unter. The female did nod her ent to residents' room and aportance of consent and ople may not be able to make emselves. Fax sent to Primary update. Residents daughter er. If the resident continues on and with no signs and ase reactions noted, multiple to found trying to get resident arated them-yelling about the have to take them-yelling t immediately downstairs to get omping at nurse's station until			Page 10 of 3	

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Date

Caring Acres Nursing and Rehab Facility Address/City/State/Zip 1000 Hillcrest Drive Anita, lowa 50020 Rule or Code Section Residents care, wt. at 139, daughter please resident is starting to gain some. resident c/o (complained of) staff telling resident not to sit too close to female resident's staff discussed resident inappropriately touching other residents at times. No other concerns at this time. Plan is for resident to remain in facility contrary to resident's belief, daughter is unable to provide the care he needs. Family has no concerns at this time. On 4/9/23 at 2:48 PM resident touching a female resident thigh and rubbing her shoulders and kissed her. On 4/16/23 6:19 PM resident sitting on couch in lounge, seen trying to get his hands up underneath another resident shirt. Residents separated, and he	Augus	17, 2023	
Rule or Code Section Rule or Code Section Rule or Code Section Rule or Code Section Rature of Violation Class Class	Survey Dates: July 25, 2023 – August 3, 2023		
residents care, wt. at 139, daughter please resident is starting to gain some. resident c/o (complained of) staff telling resident not to sit too close to female resident's staff discussed resident inappropriately touching other residents at times. No other concerns at this time. Plan is for resident to remain in facility contrary to resident's belief, daughter is unable to provide the care he needs. Family has no concerns at this time. On 4/9/23 at 2:48 PM resident touching a female resident thigh and rubbing her shoulders and kissed her. On 4/16/23 6:19 PM resident sitting on couch in lounge, seen trying to get his hands up underneath another resident shirt. Residents separated, and he			
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In an interview on 7/26/23 at 11:18 AM, the resident's daughter reported that the resident was accused of touching a female resident, the resident has always been lovey in behavior. She stated the facility hasn't informed her that anything has happened between this resident and other residents since the new company took over in 11/22. In an interview on 7/27/23 at 1:16 PM Resident #12 reported that she has observed the resident touch Resident #3's breast and genitals. Resident #12 has observed the resident take his penis out of his slacks and Resident #3 touched the resident's penis. Resident #12 reported that she saw this before the resident had COVID in 4/23. In an interview on 7/26/23 at 2:31 PM, Staff A, CNA, reported that the resident's nickname among staff was		Page 11 of 3	

Facility Administrator Date

#6206			Date: August 17, 2023			17, 2023
Facility Name: Caring Acres Nursing	ng and Rehab		Survey Dates: July 25, 2023 – August 3, 2023		2023	
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Rule or Code Section	Nature	e of Violation	Class	Fine A	mount	Correction date
with statt beg He She tour break sep In a reprincie previand reprincie previand reprincie production of the trausch trausch trausch care considered the trausch trausc	h staff. She stated stated he hasn't had any ginning of May but be would sit on the course stated he never would he hasts. She stated she sident #3 touching he barated them and red an interview on 7/26/2 ported that the other red dent was Resident #2 vious Administrator and was informed the incorted to the SA. She do to be reported. The MDS dated 5/8/2 bident had short term oblems, had severely ly decision making, a organized thinking be a MDS documented to umatic brain dysfunct hizophrenia. The Care Plan revised of coumented the resident pement related to impre Plan directed staff	23 at 2:16 PM, the DON esident involved in the 1/24/23 5. She stated she talked to the about the incident on 1/24/23 cident didn't need to be stated she didn't know they 3 for Resident #5 revealed the and long-term memory impaired cognitive skills for nd had inattention and chavior present that fluctuates. diagnoses to include non- ion, Alzheimer's disease, and on 7/20/23 for Resident #5 at is at risk for wandering and paired safety awareness. The				Page 12 of 3

Date

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Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date
2. Follow f 3. Identify escapist; lo exercise? 4. Monitor times. Doc diversion in The Care F documente sitting on th rooms relat directed sta 1. Anticipa 2. Caregiv interaction, passes by. 3. Psyche medication The Care F behavior. The Progre following: On 6/10/23 nurse to ex their rooms different ca which were medication medication	facility elopen pattern of was poking for sor location with ument wands atterventions. Plan revised of the resider ne floor and geted to cognitisaff as follows attention, ar referral as no management plan lacked a less Notes for some sound items the content of the pass. Reside pass. Reside pass. Reside pass. Reside pass.	the resident's needs. e opportunities for positive nd to stop and interact as eeded for behavior and				Page 13 of 3

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Rule or Code Section	Nature	e of Violation	Class	Fine A	Amount	Correction date
	had walked in on reside an inappropriate act. CN separate residents and resident out of the room Resident #5 until nurse assessment. Male resid and this nurse went bac assessment completed completed. resident stat she was okay with what didn't mind it. Skin assebreaks, marks or vaginathat she was not injured showing any obvious sig distressed, not crying or or physically aggressive by staff on resident to elbe wandering a few time room. Contacted Admin immediately after incide separating the residents On 7/18/23 at 9:39 AM I resident's brother at 9:3 incident between reside stated that he wanted faright and make sure his and gave consent for rehospital for evaluation pphysician that were received.	ported to this nurse that she nt and another resident during NA had already started to this nurse took the other and delegated cna to stay with could get back and perform ent escorted to nurses' station k to resident's room. Skin along with psycho-social evalued to this nurse when asked if happened and she stated she ssment revealed no skin all bleeding. Resident stated or hurt. Resident was not gns of being upset or agitated. She was not verbally and the tour checks completed insure safety. Resident found to be and redirected back to her istrator, DON and ADON int at approx. 10:21 PM after standard and a male resident. Brother acility to do what they think is sister is okay. Brother aware sident to be seen at local er orders from the resident's				Page 14 of 3

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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Rule or Code Section	Naturo	e of Violation	Class	Fine A	Amount	Correction date
	room, took off his clother (Sexual ASSUALT Nurse patient denied sexual in told him to stop, then Cl reports telling other resisted report, he left patient's report hallway. Patient time. -Description of Assault: said "he wanted to do so here." He took his and hoccurred at another facisaid "In my room." Patient in different ways if the patient denies each time. Staff CNA at nursing hoon top of the patient. Shoundressed and patient told male to leave room left, dressed, and was efacility. Nursing Home Fincident to the SA and creport. -Activities Following the told him get off, get off." said get outta there. He room." Patient was brounterviewed by SANE R Brother called and consexam done and to defer	Patient was in her room, male ex" patient said, "get outta her clothes off. She stated this lity. Asked to clarify and then ent was asked multiple times here was penile penetration, e. (vaginally, orally, anally). The walked in and found male he stated that male was undressed waist down. CNA and get dressed. Male got up, escorted to a different hallway in facility called and reported halled law enforcement to the sault: Patient account: "I some people walked in and dressed up and got outta the light to ED for assessment. Ns and law enforcement. Halled the internal exam. I Appearance Note Full body				Page 15 of 3

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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Facility Address 1000 Hillcrest D Anita, Iowa 500		LG				
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date
Geomon	In an interview on 7/26/2 reported that Resident # times and was combative the hall for someone to room. When she tried to the resident came at he Resident #11 did not see but she felt she could be whoever was in charge because she made her resident would come into and look at her and it would uncomfortable. In an interview on 7/26/2 brother reported that he 1/24/23 incident or any sexual behavior or the restated he was informed sexual abuse that occur. In an interview on 7/26/2 reported that the resident charted on 1/24/23 were stated she knew the resident families did not giv sexual behavior at the fathe incident to the facility that the resident to the facility sexual behavior at the fathe incident to the facility that the resident to the facility sexual behavior at the father incident to the facility that the resident to the facility sexual behavior at the father incident to the facility that the resident to the facility sexual behavior at the father incident to the facility that the resident to the facility sexual behavior at the father incident to the facility that the resident to the facility sexual behavior at the father incident to the facility that the resident to the facility sexual behavior at the father incident to the facility that the resident to the facility sexual behavior at the father incident to the facility that the resident to the father incident to the fat	e her be sexually inappropriate e. Resident #11 stated she told that she couldn't sit with her uncomfortable. She stated the o her room and sit on the sofa as creepy and made her 23 at 1:17 PM, the resident's was not informed of the other incidents of inappropriate esident's issues wandering. He by the facility of the incident of cred 7/17/23. 23 at 2:16 PM, the DON of the incident she expected in the incident she ex				
						Page 16 of 3 7
Facilit	y Administrator		 e			

Citation Number: #6206			Date: August 17, 2023				
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Facility Address/City/Sta 1000 Hillcrest Drive Anita, Iowa 50020	te/Zip	LG					
Rule or Code Section	Nature	e of Violation	Class Fine Amount Correcti			Correction date	
interaction in the clin The facility Allegation date of 7/1. The facility Allegation date of 7/1. The facility and process protection identificaty neglect, reproperty. doing all the occurrence 2. New expense of the property of the propert	n with a male relical record for ty policy Compas of Abuse/Ne 23 revealed: acility will develored for screen of residents attion, investigation, investigation investigation investigation investigation investigation or designee, or designee, or designee, or practices and tial orientation. To by the could be not to all expression in the consensual sexual violation: A sor reported by but has not ye but has not ye could be noncomposed in the consensual sexual sexual sexual sexual sexual sexual sexual sexual to an abuse, including misapproprigation: The factorial record for abuse, including misapproprigation: The factorial record for abuse, including misapproprigation: The factorial record for abuse in the factorial record for abuse.	dident on 1/24/23 of a sexual resident. The Progress Note is Resident #4. Iliance with Reporting reglect/Exploitation with revision op and operationalize policies rening and training employees, and for the prevention, on, and reporting of abuse, and misappropriation of a to assure that the facility is a control to prevent be educated by the department on issues related to abuse diabuse reporting requirements. Annual education and training resident as situations arise, and contact of any type with a residuation or occurrence that is a staff, resident, relative, visitor to been investigated and, if ampliance with the Federal mistreatment, exploitation, ding injuries of unknown into of resident property contact as listed above in				Page 17 of 3	

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).

Date

Citation Number #6206	er:				Date: August	17, 2023
Facility Name: Caring Acres No	ursing and Rehab		Survey Dates: July 25, 2023 – August 3, 2023			
Facility Address 1000 Hillcrest D Anita, Iowa 5002		LG				
Rule or Code Section	Nature	e of Violation	Class	Fine A	Amount	Correction date
	as described below. 6. Protection: The facility harm during an investigator. 7. The Licensed Nurse a. Respond to the protect him/her from furth b. Remove the aresident care areas. c. Notify the Add d. Notify the atternative e. Monitor and condition, including responding interventions. f. Document actor. g. Complete an h. Revise the recresident's medical, nursing interventions.	will: the needs of the resident and ther incident. accused employee from ministrator or designee. ending physician, resident's ve, and Medical Director. document the resident's conse to medical treatment or tions taken in the medical incident report is indicated. esident's care plan if the ing, physical, mental, or oreferences change as a result				Page 18 of 3
						Page 18 of 3

Facility Administrator

Date

Citation Numb #6206						Date: August 17, 2023		
Facility Name: Caring Acres N	ursing and Rehab		Survey Dates: July 25, 2023 – August 3, 2023					
Facility Address 1000 Hillcrest D Anita, Iowa 500		LG						
Rule or Code Section	Natur	e of Violation	Class	Fine A	mount	Correction date		
58.19(2)	residents. The resident facility shall provide, as required nursing service of qualified nurses with in these rules: 58.19(2) Medication and j. Provision of accurate intervention for all reside adverse symptoms which mental, emotional, or pholicy review, and staff provide care consistent practice, to prevent presencessary treatment and of a pressure ulcer for 1 (Resident #1). The facilities idents. The MDS (Minimum Dathe definition of pressure usual Darkly pigmented skin residents skin resident	appropriate, the following es under the 24-hour direction ancillary coverage as set forth discrete the discrete that treatment. assessment and timely ents who have an onset of chirepresent a change in hysical condition. (I, II, III) clinical record review, facility interview, the facility failed to with professional standards of assure ulcers and provide discrete to promote healing of 1 resident reviewed ity reported a census of 32 ta Set) assessment identifies electers: with non-blanchable redness ally over a bony prominence. may not have a visible ones only it may appear with		\$5500.0	00	Due Upon Receipt		
						Page 19 of 3		

Date

Facility Administrator

Citation Numb #6206	er:				Date: August	17, 2023
Facility Name: Caring Acres N	ursing and Rehab		Survey Dates: July 25, 2023 – August 3, 2023			2023
1000 Hillcrest D Anita, Iowa 500		LG				
Rule or Code Section	Nature	e of Violation	Class	Fine A	Amount	Correction date
	as a shallow open ulcer without slough (dead tis	ess loss of dermis presenting with a red or pink wound bed, sue, usually cream or yellow in t as an intact or open/ruptured				
	may be visible but bone exposed. Slough may be	tissue loss. Subcutaneous fat , tendon or muscle is not e present but does not obscure May include undermining and				
	bone, tendon or muscle hard necrotic tissue). m	s tissue loss with exposed . Slough or eschar (dry, black, nay be present on some parts n includes undermining and				
	Unstageable Ulcer: inab	ility to see the wound bed.				
	blanchable deep red, m. Intact skin with localized blanchable deep red, m. to damage of underlying preceded by tissue that warmer or cooler as cor These changes often prediscoloration may appear pigmented skin. This inj	njury (DTPI): Persistent non- aroon or purple discoloration. If area of persistent non- aroon, purple discoloration due is soft tissue. This area may be is painful, firm, mushy, boggy, inpared to adjacent tissue. ecede skin color changes and				
						Page 20 of 3

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).

Date

Citation Number #6206	er:				Date: August	17, 2023
Facility Name: Caring Acres No	ursing and Rehab		Survey D July 25, 2		ugust 3, 2	2023
Facility Address 1000 Hillcrest D Anita, Iowa 500		LG				
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date
	Findings Included:					
	listed an admission date a Brief Interview of Men out of 15, which indicate impairment. The MDS ir complex conditions of p diabetes mellitus, psychamputee of the right and Resident #1 required expersons for bed mobility transfers and used a whole The MDS documented to unhealed pressure ulce. The Baseline Care Plan Resident #1 presented issues. The care plan all required two plus perso and used a wheelchair flacked documentation of issue and interventions. The Skin Observation Truesident #1 did not presadmission to the facility. The Task List Report for 3/3/23 documented the sylas assigned to observe	ncluded diagnoses of medically eripheral vascular disease, nosis and above the knee did left leg. The MDS indicated stensive assistance of two plus of total dependency for neelchair for a mobile device. The resident did not have any res/injuries on admission. In dated 3/3/23 identified to the facility with skin integrity less documented the resident me for bed mobility, transfers for mobility. The care plan of the specified skin integrity to prevent a pressure ulcer. If ool dated 3/3/23 identified sent with a buttock wound upon the resident #1 initiated on Certified Nurse's Aides (CNA')				
		#1 dated 3/3/23 and 3/10				Dog 04 of 0
					_	Page 21 of 37
Facilit	y Administrator	Date	e			

Citation Numb #6206	er:				Date: August 7	17, 2023
Facility Name: Caring Acres N	ursing and Rehab		Survey Dates: July 25, 2023 – August 3, 2023			2023
Facility Address 1000 Hillcrest D Anita, Iowa 500		LG				
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date
	indicated moderate risk	for pressure ulcers.				
	The Braden Scale Asse Sore Risk for Resident a risk for pressure ulcers.					
	The Progress Notes for following: On 3/3/23 at 10:24 PM incontinent of bowel, ca and uses a bed pan. On 3/6/23 at 11:31 AM is assessment documente scabbed area to her left antecubital area. On 3/12/23 at 9:51 AM is opened skin areas on the large open area on the incentimeters (CM) by 2.5 of green drainage. Area applied. The Progress Notes lac of skin assessments or On 3/20/23 at 2:01 PM is worsen. Daughter inform sensitivity to all dressing to provider.	Resident #1 documented the redness noted to buttocks, nnot tell when she has to go, the Registered Dietician initial d the only skin issues as a wrist and bruising to her right staff identified multiple small he left and right buttock, and a right buttock that measured 3 is CM and had a small amount is cleaned and a foam dressing ked any other documentation open areas prior to 3/12/23. Tesident's buttocks continue to ned staff the resident has a gis. Area left open to air and fax orders received to discharge				
	assess and intervene re	cord revealed staff failed to elated to skin breakdown of the formation of the pressure CM by 2.5 CM when first				Page 22 of 37

Citation Numb #6206	er:				Date: August	17, 2023
Facility Name: Caring Acres N	ursing and Rehab		Survey I July 25,		August 3, 2	2023
Facility Address 1000 Hillcrest D Anita, Iowa 500		LG				
Rule or Code Section	Nature	e of Violation	Class	Fine A	Amount	Correction date
	documented on 3/12/23					
	The Treatment Adminis Resident #1 received a buttock on 3/12/23.	tration Record showed foam border dressing to the				
	Resident #1 signed by a continue with foam dres the buttock. The order la frequency, interventions Review of the chart faile	The Fax (facsimile) Cover Sheet dated 3/12/23 for Resident #1 signed by a physician included an order to continue with foam dressing changes to the wound on the buttock. The order lacked a dressing change requency, interventions or further skin care services. Review of the chart failed to show nursing requests or clarifications orders for 3/12/23.				
	documented staff identifulli left buttock. The document	cteristics and documented a				
	The Treatment Administ Resident #1 received a buttock on 3/18/23.	tration Record showed foam border dressing to the				
	The Weekly Skin Asses documented the presen buttock but lacked meas characteristics.	ce of a wound to the left				
	getting bigger where the	sment dated 3/20/23 tock appears that the area is a bandage is covering the t lacked measurements or any				
						Page 23 of 3

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).

Date

Citation Number: #6206					Date: August 1	17, 2023
Facility Name: Caring Acres No	ursing and Rehab		Survey Dates: July 25, 2023 – August 3, 2023			2023
Facility Address/City/State/Zip 1000 Hillcrest Drive Anita, Iowa 50020		LG				
Rule or Code Section	Nature	e of Violation	Class	Fine A	Amount	Correction date
	to implement intervention buttock pressure ulcer. The Pressure Injury Pre 2023 identified the policia avoidable pressure injuries to implement evidence-residents who are assessments who are assessments injury. Policy E Guidelines identify indiviaddress specific factors assessment. Intervention accordance with the phystype of prevention device the frequency for perform be documented in the call relevant staff. The efficient and/or wound, modifications include. In an interview on 07/27 Nursing (DON), reported low risk for developing a When asked how the rewound, the DON stated unavoidable. When remurinary catheter prevent Resident #1's limited moders.	cord revealed the facility failed ons after the discovery of the vention Guidelines dated July y is to prevent the formation of ies and to promote healing of s, it is the policy of this facility based interventions for all seed at risk or who have a explanation and Compliance idualized interventions that will identified in the resident's risk sment and any pressure injury ns will be implemented in vsician's orders, including the est obe used and, for tasks, ming them. Interventions will are plan and communicated to fectiveness of interventions will agoing assessment of the Considerations for needed 1/23 at 2:44 PM, the Director of d Resident #1 assessed to be a pressure ulcer on admission, sident developed the buttock, it was caused by moisture, inded that Resident #1's ed moisture, and pointed out obility and cognitive ability, the see that. The DON reported				Page 24 of 3

Facility Administrator Date

Citation Number #6206	er:				Date: August 1	17, 2023
Facility Name: Caring Acres No	ursing and Rehab		Survey D July 25, 2		ugust 3, 2	2023
1000 Hillcrest D Anita, Iowa 500		LG				
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date
	frequency of wound car discuss concerns the De have accepted her as a lot going on and she wa	for clarification regarding e. When attempting to further ON stated, the facility shouldn't n admit because there was a s gone around that time due to stated things slipped through				Page 25 of 3 7
					_	1 aye 29 01 31
Facility	y Administrator	Dat	e			

Citation Number #6206	er:		Date: August 17, 2023				
Facility Name: Caring Acres Nu	ırsing and Rehab			urvey Dates: ıly 25, 2023 – August 3, 2023			
Facility Address/City/State/Zip 1000 Hillcrest Drive Anita, Iowa 50020		LG					
Rule or Code Section	Nature	e of Violation	Class	Fine A	Amount	Correction date	
58.20(15)	Every nursing facility sh service supervisor who services and maintenance of optifunctioning; (III) DESCRIPTION: Based on clinical record resident interviews, staff review the facility failed (including both quantity care for the behavioral freviewed (Resident #3, and the facility reported a confidence of the service of th	shall: fordinate rehabilitative health of daily living, promotion imal physical and mental review, family interviews, f interviews and facility policy to provide sufficiency of staff and competency of staff) to health of 5 of 5 residents #4, #5, #6, and #10). ensus of 32 residents. Set (MDS) dated 6/5/23 for e resident had short term and lems, had severely impaired decision making, and had lized thinking behavior present ident had diagnoses of anxiety, and down's syndrome.		\$6500. (Held i Suspe		Upon Receipt	

Citation Numb #6206	er:				Date: August	17, 2023	
Facility Name: Caring Acres N	ursing and Rehab		Survey D July 25, 2	y Dates: 5, 2023 – August 3, 2023			
Facility Address/City/State/Zip 1000 Hillcrest Drive Anita, Iowa 50020		LG					
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date	
	follows: 1. Anticipate and meet to the second process of the seco	dent #3 dated 1/5/23 It is a wanderer and wanders icantly intruding on the privacy he care plan directed staff as a wandering by offering actured activities, food, prefers: Coloring, iPad, and weight loss. In the care plan directed staff as a wandering by offering actured activities, food, prefers: Coloring, iPad, and weight loss. In the wandering by offering actured activities, food, prefers: Coloring, iPad, and weight loss. In the wandering by offering actured activities, food, prefers: Coloring, iPad, and weight loss. In the wandering by offering actured activities, food, prefers: Coloring, iPad, and weight loss. In the wandering by offering actured activities, food, prefers: Coloring, iPad, and weight loss. In the wandering by offering actured activities, food, prefers: Coloring, iPad, and weight loss. In the wandering by offering actured activities, food, prefers: Coloring, iPad, and weight loss. In the wandering by offering actured activities, food, prefers: Coloring, iPad, and weight loss. In the wandering by offering actured activities, food, prefers: Coloring, iPad, and weight loss. In the wandering by offering actured activities, food, prefers: Coloring, iPad, and weight loss. In the wandering by offering actured activities, food, prefers: Coloring, iPad, and weight loss. In the wandering by offering actured activities, food, prefers: Coloring, iPad, and weight loss. In the wandering by offering actured activities, food, prefers: Coloring, iPad, and weight loss.				Page 27 of 3	

rage 27 of 37

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).

Date

Citation Numb #6206	oer:		Date: August 17, 2023				
Facility Name Caring Acres N	: Iursing and Rehab		Survey I July 25, 2	Dates: 2023 – August 3, 2023			
Facility Address/City/State/Zip 1000 Hillcrest Drive Anita, Iowa 50020		LG					
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date	
	licking her wall. Staff ha out of other resident roo Observed crawling dow On 1/14/23 at 10:53 PM being silly dancing in the easily redirected with st around 10:00 PM. On 1/15/23 at 3:41 PM without walker. Easily redirected without walker. Easily redirected with st around 10:00 PM. On 1/16/23 at 10:10 PM licking her wall-not being rooms, her not using FV half crawling down the hevaluation put on calend On 1/16/23 at 11:48 PM dose of Risperdal. Cont behaviors of being in other wall-not walker, and star doorways. On 1/17/23 at 10:10 PM increased wandering in rooms. On 3/16/23 at 10:08 AM (SW) another resident vother resident put a han trying to get around her other resident's hand ar intervened and separate attempted to run her wall 2 when a male resident of the resident's hand ar intervened and separate attempted to run her wall 2 when a male resident of the resident of the resident's hand ar intervened and separate attempted to run her wall 2 when a male resident of the resid	I resident wandering facility and e hall way at bedtime. Resident aff. Resident went to bed resident wandering facility edirected most of the time. I update returned in regards to g able to keep her out of others VW (4 wheeled walker), keeps hallway. Get psychiatric dar for tomorrow. I resident started on increased inues to have multiple her resident rooms, walking hading in the middle of I resident continues to have facility and into other resident I reported to Social Worker walked by this resident. The lad on the resident #3 slapped the lad began yelling. Staff				Page 28 of 3	

Facility Administrator Date

#6206			Date: August	17, 2023	
Facility Name: Caring Acres Nursing and Rehab		Survey Date July 25, 2023	ates: 023 – August 3, 2023		
Facility Address/City/State/Zip 1000 Hillcrest Drive Anita, Iowa 50020	LG				
Rule or Code Natu Section	re of Violation	Class	ne Amount	Correction date	
she refused. Staff interneeded to move to allostarted crying and state physical contact obser On 3/27/23 at 6:02 PM resident's walker when and yelled at him that intervened and separa On 3/27/23 at 11:15 Al and mood assessment more behaviors of beir aggressive. On 3/28/23 at 10:16 Al discussed increased be the resident would be if family. On 4/9/23 at 2:50 PM is and asking him to mar male resident lap kissis. On 4/11/23 at 1:54 PM one at meals due to we activities. Staff had to it remind to eat. The Care Plan for Resinterventions for sexual The Plan of Care Note documented attendees (Certified Dietary Mana Resident's discharge patime. Advanced directives.	ted the two. M SW unable to complete BIMS E. Resident recently displaying ag verbally and physically M SW and Activity Director chaviors and need for activities interested in. Discussed with resident seeking male resident ry her. Resident found sitting on ing him in the family room. Tesident required much one on anted to leave and do other redirect resident to table and ident #3 lacked any			Page 29 of 3	

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).

Date

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Facility Addre 1000 Hillcrest I Anita, Iowa 500		LG				
Rule or Code Section	Nature	e of Violation	Class	Fine A	Amount	Correction date
	syndrome. At this time r of concern. Resident we the last month. Resident table even after multiple Resident is not able to due to being cognitively incontinent of bladder manders but is usually prother resident is not doing the but does need queuing wanders but is usually prother resident's rooms. Activities. Family concerning the believes it will have believes to the protect of the sister reported that it was verbally express herself syndrome. The sister state sexually after she had chid in a male resident's staff that she was horny different room and had a sister reported she has facility of any additional inappropriate sexual believes. The Minimum Data Status (BIMS) score of a status (BIMS) scor	rost of the time. At this time erapy. Resident is independent and redirection. resident pretty good about staying out of Resident attends most runs sister (POA) suggests we be neron and decrease Risperdal elp with this resident's appetite. 23 at 12:33PM, the resident's as hard for the resident to reduce to her diagnosis of down's attended the resident acted out covID-19. Staff reported she room, Resident #4, and told remedication changed. The not been informed by the incidents involving havior. Set (MDS) dated 6/5/23 for Brief Interview of Mental 4 out of 15 which indicated tion. The MDS documented a				Page 30 of 3

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).

Date

Citation Numb #6206	per:				Date: August 17, 2023				
Facility Name Caring Acres N	: Iursing and Rehab			rey Dates: 25, 2023 – August 3, 2023					
Facility Address/City/State/Zip 1000 Hillcrest Drive Anita, Iowa 50020		LG							
Rule or Code Section	Natur	e of Violation	Class	Fine A	mount	Correction date			
	documented the resider (having multiple episode expectations. The Care -Anticipate and meet the -Caregivers to provide conteraction, attention, storagivers to provide conteraction, attention, storaging cause. The Care Plan dated 6/has the potential to be a the aging process/confustaff as follows: -Assess and anticipate -Give the resident as more and activities. The Care Plan lacked a behaviors. The Progress Note for Following: On 1/24/23 at 12:12 PN went to a female reside was lunch time. Upon e was leaning over female female's breasts and kis informed the resident to female resident if she wonsented to that encounted yes. The DON we educated him on the im	opportunity for positive op and interact as passes by des and attempt to determine 9/23 documented the resident verbally aggressive related to usion. The Care Plan directed resident needs. any choices as possible about ny indication of sexual Resident #4 documented the I the Director of Nursing (DON) and room to inform her that it intering the room, Resident #4 de residents' bed, groping the sing her intimately. The DON of leave her room and asked the				Page 31 of 3			

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Facility Addres 1000 Hillcrest Dr Anita, Iowa 5002	rive	LG				
Rule or Code Section	Nature	e of Violation	Class	Fine A	Amount	Correction date
	Care Provider (PCP) to also notified of encounted On 1/30/23 at 9:12 PM dose of Namenda with radverse reactions noted tonight- found trying to g(Resident #5) to let him nurse separated them-y does he have to take the went immediately downs and stomping at nurse's upstairs with it. On 3/23/23 at 2:42 PM GADON, SSD (Social Ser Director, resident's daugresidents care, wt. at 13 starting to gain some. Fet telling resident not to sit staff discussed resident residents at times. No of is for resident to remain belief, daughter is unable needs. Family has no coon 4/9/23 at 2:48 PM resident thigh and rubbit her. On 4/16/23 6:19 PM resident shirt-residents at resident shirt-residents are now -yelling about it better the set of the set	resident continues on increase no signs and symptoms of any I, multiple behaviors noted get resident from room 206 go up under her shirt-this relling about taking his pill-why rem-yelling about blanket-staff stairs to get it stood shouting a station until she got back. Care Plan Meeting: attended revices Director), Activity ghter, resident. Discussed 19, daughter please resident is resident c/o (complained of) staff too close to female resident's inappropriately touching other ther concerns at this time. Plan in facility contrary to resident's resident touching a female resident touching a female resident sitting on couch in lounge ands up under neath another separated, and he went to his				Page 32 of 3

Facility Administrator Date

Citation Numb #6206	er:				Date: August	17, 2023	
Facility Name: Caring Acres N	ursing and Rehab			y Dates: 5, 2023 – August 3, 2023			
Facility Address 1000 Hillcrest D Anita, Iowa 500		LG					
Rule or Code Section	Nature	e of Violation	Class	Fine A	Amount	Correction date	
	always been lovey in behadn't informed her of a between this resident ar new company took over. In an interview on 7/27/2 reported that she had of Resident #3's breast an observed the resident tand Resident #12 reported the resident had COVID in 4. In an interview on 7/26/2 reported that the resident Captain McFeely Pants, inappropriate with staff. him to behave. The aide issue since before the bhe was touchy feely. He grope female residents. base. He would touch the touch breasts outside of remembered him with R times and staff separate. In an interview on 7/26/2 reported that she talked about the incident on 1/26/2 reported that she talked about the incident on 1/26/2 reported that she talked about the incident on 1/26/2 reported that she talked about the incident on 1/26/2 reported that she talked about the incident on 1/26/2 reported that she talked about the incident on 1/26/2 reported that she talked about the incident on 1/26/2 reported that she talked about the incident on 1/26/2 reported that she talked about the incident on 1/26/2 reported that she talked about the incident on 1/26/2 reported that she talked about the incident on 1/26/2 reported that she talked about the incident on 1/26/2 reported that she talked about the incident on 1/26/2 reported that she talked about the incident on 1/26/2 reported that she talked about the incident on 1/26/2 reported that she talked about the incident on 1/26/2 reported that the resident talked about the incident on 1/26/2 reported that the resident talked about the incident on 1/26/2 reported that the resident talked about the incident on 1/26/2 reported that the resident talked about the incident on 1/26/2 reported that the resident talked about the incident on 1/26/2 reported that the resident talked tal	23 at 1:16 PM Resident #12 beserved the resident touch d genitals. Resident #12 has ake his penis out of his slacks of the resident's penis. That she saw this before the 4/23. 23 at 2:31 PM, Staff A, CNA, and that he can get are stated he hasn't been an reginning of May but before that a would sit on the couch and are he never would go past first and the never would go past first and				Page 33 of 3	
						Page 33 of 3	

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Facility Name Caring Acres N	: Iursing and Rehab		Survey I July 25,		August 3, 2	2023
Facility Addre 1000 Hillcrest I Anita, Iowa 500		LG				
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date
	resident had short term problems, had severely daily decision making, a disorganized thinking be The MDS documented of traumatic brain dysfunct schizophrenia. The Care Plan revised of documented the resider elopement related to im Care Plan directed staff 1. Ensure a safe distant have a tendency to bece 2. Follow facility elopen 3. Identify pattern of water escapist; looking for sor exercise? 4. Monitor location with times. Document wanded diversion interventions. The Care Plan revised of documented the resider sitting on the floor and grooms related to cognitic directed staff as follows 1. Anticipate and meet 2. Caregivers to provide	impaired cognitive skills for and had inattention and chavior present that fluctuates. diagnoses to include nontion, Alzheimer's disease, and on 7/20/23 for Resident #5 at is at risk for wandering and paired safety awareness. The as follows: ce from other residents who ome agitated with her actions. In an action of the properties of t				

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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Facility Address/City/State/Zip 1000 Hillcrest Drive Anita, Iowa 50020		LG				
Rule or Code Section	Nature	e of Violation				Correction date
	wandering in the facility resident's rooms on the 1. 1/30/23 2. 2/1/23 3. 2/12/23 4. 2/19/23 5. 3/30/23 6. 4/9/23 7. 4/17/23 8. 4/19/23 9. 7/23/23 The Progress Notes for following: On 6/10/23 at 3:46 PM in nurse to express concertheir rooms while they will different candy items that which were not hers. Remedication cart and stol medication pass. Resideresident continued with shift. On 7/17/23 at 10:29 PM resident's room. CNA rehad walked in on reside an inappropriate act. CN separate residents and	the resident documented and/or wandering into following: the resident documented the multiple residents approached in d/t (due to) resident being in vere not. Resident had multiple at she was hiding and eating esident also walked by the applesauce in the middle of the entitle educated but ineffective as behavior throughout the whole				
	Kesident #5 until nurse	could get back and perform	<u> </u>			Page 35 of 3

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).

Date

Citation Numb #6206	er:	Date: August 17			17, 2023	
	ursing and Rehab		Survey I July 25, 2		ugust 3, 2	2023
Facility Address 1000 Hillcrest E Anita, Iowa 500		LG				
Rule or Code Section	Natur	e of Violation	Class	Fine A	mount	Correction date
	and this nurse went back assessment completed completed. resident start she was okay with what didn't mind it. Skin asses breaks, marks or vaginathat she was not injured showing any obvious signification or physically aggressive by staff on resident to element of the wandering a few time room. Contacted Admin immediately after incides separating the residents On 7/18/23 at 9:39 AM resident's brother at 9:3 incident between resides stated that he wanted faright and make sure his and gave consent for rehospital for evaluation physician that were recently after the ED (Emergency Deresident #5 signed by a AM revealed: -Per staff report, another room, took off his clother (Sexual ASSUALT Nursignatient denied sexual in told him to stop, then Cl	agitated. She was not verbally a Half hour checks completed insure safety. Resident found to see and redirected back to her istrator, DON and ADON int at approx. 10:21 PM after s. DON and ADON spoke with 2 AM. DON updated brother on int and a male resident. Brother acility to do what they think is sister is okay. Brother aware sident to be seen at local per orders from the resident's				Page 36 of 3

Facility Administrator

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).

Date

Citation Number: #6206					Date: August 17, 2023		
Facility Name: Caring Acres Nursing and Rehab			Survey I July 25,	Survey Dates: July 25, 2023 – August 3, 2023			
Facility Address/City/State/Zip 1000 Hillcrest Drive Anita, Iowa 50020		LG					
Rule or Code Section	Natur	e of Violation	Class	Class Fine Amount Correction date			
report, he left patient's room and was sent to a different hallway. Patient has no complaints at the time.							
FACILITY RESPONSE:							
Page 37 of 3 7							

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).

Date