

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

Citation Number: 6665		Amended Citation – Fine amount reduced by 35% to \$1,300.00 on January 19, 2018. Pursuant to Iowa Code Section 135C.43A,		Date: October 11, 2017	
Woodland Terrance				Survey Dates: September 25-28, 2017	
1922 5 th Ave. NW Waverly, Iowa 50677		DS			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

58.19(2)b	<p>481-58.19(135C) Required nursing services for residents. The resident shall receive and the facility shall provide, as appropriate, the following required nursing services under the 24 hour direction of qualified nurses with ancillary coverage as set forth in these rules: 58.19(2) Medication and treatment. <i>b.</i> Provision of the appropriate care and treatment of wounds, including pressure sores, to promote healing, prevent infection, and prevent new sores from developing; (I,II).</p> <p>DESCRIPTION:</p> <p>Based on observation, record review and staff interviews, the facility failed to develop interventions to prevent the development of a pressure ulcer for 2 of 4 residents reviewed (Residents #9 and #11). The facility reported a census of 104 residents.</p> <p>Findings included:</p> <p>Resident #9 had a Minimum Data Set (MDS) assessment with a reference date of 2/28/17. The MDS identified the resident had a Brief Interview for Mental Status score of 13. A score of 13 identified the resident had no cognitive problems. The MDS indicated Resident #9 required extensive assistance staff with bed</p>	I	\$2,000 (Held in suspension)	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: 6665		Amended Citation – Fine amount reduced by 35% to \$1,300.00 on January 19, 2018. Pursuant to Iowa Code Section 135C.43A,		Date: October 11, 2017	
Woodland Terrance				Survey Dates: September 25-28, 2017	
1922 5 th Ave. NW Waverly, Iowa 50677		DS			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

	<p>mobility, transfer, dressing, toilet use, personal hygiene and total dependence for bathing. The MDS identified the resident had no impairment in upper extremity and presented with impairment lower extremity range of motion. The MDS indicated this resident used a walker and wheelchair for mobility. The resident's diagnoses included presence of left hip joint, unspecified fall, vascular dementia, anxiety, and depression. The MDS further indicated the resident assessed was at risk of developing pressure ulcers, and had no unhealed pressure ulcers. The MDS identified the following was used for skin and ulcer treatments utilized: pressure reducing device for bed.</p> <p>A Braden Scale for Prediction of Pressure Sore Risk dated as completed 2/21/2017 documented the resident's score of 20. A score of 20 indicated the resident is low risk for pressure sore development.</p> <p>The MDS with a reference date of 4/20/17 identified descriptions of Stages of Pressure Ulcers:</p> <p>Stage I-Intact skin with non-blanchable redness of a localized area usually over a bony prominence. Darkly pigmented skin may not have a visible blanching; in dark skin tones only it may appear</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: 6665	Amended Citation – Fine amount reduced by 35% to \$1,300.00 on January 19, 2018. Pursuant to Iowa Code Section 135C.43A,	Date: October 11, 2017
Woodland Terrace		Survey Dates: September 25-28, 2017
1922 5th Ave. NW Waverly, Iowa 50677	DS	
Rule or Code Section	Nature of Violation	Class Fine Amount Correction date

	<p>with persistent blue or purple hues.</p> <p>Stage II-Partial thickness loss of dermis presenting as a shallow open ulcer with a red or pink wound bed, without slough. May also present as an intact or open/ruptured blister.</p> <p>Stage lull- Full thickness tissue loss. Subcutaneous fat may be visible but the bone, tendon or muscle is not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.</p> <p>Stage live-Full thickness tissue loss with exposed bone, tendon or muscle. Slough or eschar may be present on some parts of the wound bed. The wound often includes undermining and tunneling.</p> <p>The Weekly Skin Assessment form with an entry dated 2/21/17, indicated the heel(s) intact with no sponginess noted. Buttocks are intact. Has surgical wound(s) present to left hip. Staples are dry and intact. No drainage noted. The surrounding tissue is pink and intact with small amount of edema present. No signs of infection noted, groin and abdominal folds are pink and intact. The resident returned from the hospital on this date.</p> <p>The Weekly Skin Assessment form with an entry</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: 6665		Amended Citation – Fine amount reduced by 35% to \$1,300.00 on January 19, 2018. Pursuant to Iowa Code Section 135C.43A,		Date: October 11, 2017	
Woodland Terrance				Survey Dates: September 25-28, 2017	
1922 5 th Ave. NW Waverly, Iowa 50677		DS			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

	<p>on 3/23/17, identified the resident had a small open area on coccyx, and Desitin (skin barrier) was applied to the area.</p> <p>The Weekly Skin Assessment form continued to identify the following:</p> <p>On 3/24/17, the measurement entry identified the resident had a 1cm x 1 cm with .5 cm depth to the coccyx on the inner right buttock.</p> <p>On 3/25/17, the area on the coccyx presented as slough at the center with open granulation (healing) to edges. The open area measured 1.1 by 1.2 by 0.4cm.</p> <p>The open area to the coccyx remained open, and tunneling, area measured 1cmx1.3cm with 1 cm of depth, Wound bed described as black and necrotic (death of most of all of the cells in an organ or tissue) area had minimal amount of yellow slough present. Edges are dark pink non blanchable (does not turn red when pressed on) that is spongy. No odor present. Area was assessed by IMPACT nurse practitioner and staff received new orders. Resident will be seen by Wound Clinic on 4/3/17 for further evaluation.</p> <p>A Care Plan for skin integrity with an onset date of 1/25/17, identified what the resident wanted to</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: 6665	Amended Citation – Fine amount reduced by 35% to \$1,300.00 on January 19, 2018. Pursuant to Iowa Code Section 135C.43A,	Date: October 11, 2017
Woodland Terrance		Survey Dates: September 25-28, 2017
1922 5th Ave. NW Waverly, Iowa 50677	DS	
Rule or Code Section	Nature of Violation	Class Fine Amount Correction date

	<p>happen was to have no sores or open areas. The Care Plan revealed skin interventions were updated with a low air mattress put into place on 3/29/17 and in wheelchair on 3/30/17 after the pressure area had developed.</p> <p>The record identified as treatment administration record dated 9/20/17 identified the wound treatment was to cleanse the wound with normal saline, gently pack with Aquacel HG, (wound dressing contained silver) cover with Mepilix border every other day.</p> <p>Observations identified the following:</p> <p>On 9/25/17 at 11:30 a.m. Resident #9 observed in room, resting in bed, watching television. A pillow was under the left hip area. The bed was in low position.</p> <p>On 9/25/17 at 1:10 p.m., observed cares on this resident and a dressing was present over the coccyx area. Skin surrounding Mepilix dressing was intact and without redness. After cares were completed, resident requested to go back to lying on side to continue watching television and a pillow was placed under left side, under hip area.</p> <p>On 9/26/17 at 7:41 a.m. observation identified Staff G (licensed practical nurse) complete the</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: 6665		Amended Citation – Fine amount reduced by 35% to \$1,300.00 on January 19, 2018. Pursuant to Iowa Code Section 135C.43A,		Date: October 11, 2017	
Woodland Terrace				Survey Dates: September 25-28, 2017	
1922 5 th Ave. NW Waverly, Iowa 50677					
		DS			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

	<p>dressing change as ordered regarding pressure area on coccyx. Staff G used a saline flush to cleanse the wound and patted the area dry. Staff G measured the pressure area at this time and the area measured 1.2cmx1.2cmx.6cm. A silver AG dressing (wound dressing) was applied into wound and wound was covered with Mepilex. (dressing)</p> <p>On 9/26/17 at 8:36 a.m. resident was brought to the dining room for breakfast. Resident was asked what she wanted for breakfast and ate independently. Staff G brought resident a glass of Arginaid (resource drink that promotes wound healing.)</p> <p>In an interview on 9/26/17 at 10:30 a.m. Staff G was asked if resident had the pressure area before the fall with fracture and Staff G stated no.</p> <p>In an interview on 9/26/17, Staff F (Registered Nurse) was asked when air mattress was placed on the resident's bed and the resident's wheelchair had been initiated. Staff F stated she would have to get back to me. Staff F then verified that the air mattress and air cushion were initiated after the pressure area developed.</p> <p>In an interview on 9/27/17 at 8:00 a.m. with Staff H, (WP health supervisor) acknowledged the</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: 6665		Amended Citation – Fine amount reduced by 35% to \$1,300.00 on January 19, 2018. Pursuant to Iowa Code Section 135C.43A,		Date: October 11, 2017	
Woodland Terrace				Survey Dates: September 25-28, 2017	
1922 5 th Ave. NW Waverly, Iowa 50677		DS			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

	<p>pressure area had not developed for over a month after surgery. She stated the resident was still getting up out of bed but when questioned and acknowledged that this resident was spending more time in bed then before resident had fallen. Staff H acknowledged the air mattress and air cushion for the wheelchair were placed after the pressure area discovered. Staff H referred to the documentation from the Advanced Registered Nurse Practitioner that revealed perhaps area was suspicious for a deep tissue injury from surgery.</p> <p>In an interview on 9/27/17 at 1:00 p.m. the surgeon stated this pressure area would not be from surgery. Resident would have been placed on their side during the surgery.</p> <p>On 9/27/17 at 1:47 p.m. the Advanced Registered Nurse Practitioner (ARNP) was interviewed about documentation indicating perhaps the cause of the pressure was from how positioned during the surgery. The ARNP stated that this was speculation because of how fast the pressure area opened and worsened.</p> <p>On 9/27/17 at 2:15 p.m. Staff A (Health Supervisor), Staff B (Health Supervisor), and Staff F were interviewed and informed of the statement made by the surgeon and the ARNP. Staff F</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: 6665		Amended Citation – Fine amount reduced by 35% to \$1,300.00 on January 19, 2018. Pursuant to Iowa Code Section 135C.43A,		Date: October 11, 2017	
Woodland Terrace				Survey Dates: September 25-28, 2017	
1922 5 th Ave. NW Waverly, Iowa 50677		DS			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

	<p>stated the wound progressed so quickly that is why the ARNP was contacted to get this resident into the wound clinic quicker. Staff F also stated it was not their standard of practice to automatically put an air mattress on a bed and that no other preventative interventions were in place prior to the pressure wound being discovered.</p> <p>2. The MDS assessment dated 8/12/17 for Resident #11 identified a BIMS score of 3. A score of 3 indicated the resident had a severe cognitive impairment. The MDS revealed the resident required the extensive physical assistance of 2 persons for bed mobility, transfers, and dressing. The MDS documented range of motion impairment on 1 side of the lower extremity. The MDS identified diagnoses that included other fracture and non-Alzheimer's dementia. The MDS recorded no unhealed pressure areas.</p> <p>The Care Plan focus area, revised 7/14/17, identified an ADL (Activities of Daily Living) self-care performance deficit related to dementia and impaired mobility with right fibula fracture currently. The Care Plan directed staff to provide 1 or 2 (person) assist with dressing and 1 assist transfer with walker for stability. The care plan informed staff to use 2 (person) assist as needed and the resident NWB (non-weight bearing) to the</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: 6665		Amended Citation – Fine amount reduced by 35% to \$1,300.00 on January 19, 2018. Pursuant to Iowa Code Section 135C.43A,		Date: October 11, 2017	
Woodland Terrace				Survey Dates: September 25-28, 2017	
1922 5 th Ave. NW Waverly, Iowa 50677					
		DS			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

	<p>right lower extremity with CAM (controlled ankle movement) boot on at all times; elevate as much as possible. The focus area revised 7/14/17 identified a potential for skin breakdown related to impaired mobility and incontinence. The care plan directed staff to check the resident's skin weekly for breakdown and report to the physician as needed.</p> <p>The Weekly Skin Assessment dated 9/17/17 at 10:39 p.m. documented the resident's skin WNL (with-in normal limits), skin intact, and free from breakdown.</p> <p>The Weekly Skin Assessment dated 9/23/17 at 12:20 p.m. documented no skin areas under sections abrasion/skin tear/rash, pressure, or other.</p> <p>Observation on 9/26/17 at 8:00 a.m. revealed Staff C, RN, Staff E, Certified Nurse Aide (CNA), and Staff D, RN, entered the resident's room to provide cares. Staff C removed the resident's CAM boot from the right lower extremity. Staff C then removed the inner brace off the foot revealing the presence of a skin area on the back of the right heel/Achilles tendon area. The nickel coin sized skin area with a dime-sized, dark scabbed center area; with reddened skin surrounding did not blanch easily when touched.</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: 6665		Amended Citation – Fine amount reduced by 35% to \$1,300.00 on January 19, 2018. Pursuant to Iowa Code Section 135C.43A,		Date: October 11, 2017	
Woodland Terrace		Survey Dates: September 25-28, 2017			
1922 5 th Ave. NW Waverly, Iowa 50677		DS			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

	<p>Staff C commented the area did not quite look like that on the previous Friday. Staff C reapplied the brace and CAM boot on the resident without measuring the area.</p> <p>In an interview on 9/26/17 at 9:50 a.m., Staff A, (Health Supervisor), and Staff B, (Health Supervisor) provided documentation regarding Resident #11. Staff A and Staff B clarified nurses were to do weekly skin assessments and CNA staff should observe for skin issues daily reporting any changes or new areas. Staff A and Staff B stated they would have expected staff to note and report observed area on the heel when the boot removed. Staff A and Staff B stated the MDS nurse is responsible for measurements on the first floor. Staff A and Staff B said the plan going forward was to measure area, Stage it, and report it to the physician.</p> <p>In an interview on 9/26/17 at 9:55 a.m., Staff C (Registered Nurse) agreed the area observed appeared the approximate size of a nickel coin. Staff C confirmed she saw the area on the back of the right heel/Achilles tendon area on 9/22/17. Staff C commented the area looked the same size on 9/22/17 as it did on 9/26/17 but the scabbed center not as dark. Staff C stated normally she checks skins on shower days and then documents the areas. Staff C said on</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: 6665	Amended Citation – Fine amount reduced by 35% to \$1,300.00 on January 19, 2018. Pursuant to Iowa Code Section 135C.43A,	Date: October 11, 2017		
Woodland Terrance		Survey Dates: September 25-28, 2017		
1922 5 th Ave. NW Waverly, Iowa 50677	DS			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date

	<p>9/22/17 it was a hectic day and she did not document the skin area and she should have.</p> <p>Review of the clinical record on 9/26/17 at 10:00 a.m. revealed the record lacked documentation of the skin area observed on the back of the right heel/Achilles tendon area.</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: 6665		Amended Citation – Fine amount reduced by 35% to \$1,300.00 on January 19, 2018. Pursuant to Iowa Code Section 135C.43A,		Date: October 11, 2017	
Woodland Terrance				Survey Dates: September 25-28, 2017	
1922 5th Ave. NW Waverly, Iowa 50677					
		DS			
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).