Iowa Department of Inspections and Appeals
Health Facilities Division
Citation

FC#5660	**Amended on April 16, 2015. Fine amount held in suspension.**		**Date: January 21, 2015**
Touchstone Living Center		**Survey dates: December 22-29, 2015**	
1800 Indian Hills Drive			
Sioux City, Iowa 51104	**Ds/ss/ks**		

		Class	Fine Amount	Correction date
58.19(2)b	**481—58.19 (135C) Required nursing services for residents.** The program plan for nursing facilities shall have 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)** *Medications and treatment.* *b.* Wound care; (I, II) **DESCRIPTION:** Based on observation, record review and interviews with resident, staff, resident emergency contact person and medical provider's nurse, the facility failed to provide effective interventions to minimize the risk of pressure ulcer development and promote healing of pressure ulcers for 2 of 4 residents reviewed (Residents #1 and #4). The facility reported a census of 83 residents. Findings included: 1. Resident #4 had an admission Minimum Data Set (MDS) assessment with a reference date of 10/14/14. The MDS reflected the resident required extensive assistance from staff with bed mobility transfers and had not walked during the previous 7 day assessment period. The MDS documented the resident with limitations in range of motion in both lower legs, without pressure ulcers and at no risk for pressure ulcer development. The MDS identified the resident with diagnoses which included acute alcoholic hepatitis. A MDS assessment with a reference date of 12/4/14 reflected Resident #4 continued to require extensive assistance from staff for bed mobility transfers and had	**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 withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (Supp. 2009).

FC#5660	**Amended on April 16, 2015. Fine amount held in suspension.**		**Date: January 21, 2015**
Touchstone Living Center		**Survey dates: December 22-29, 2015**	
1800 Indian Hills Drive			
Sioux City, Iowa 51104	**Ds/ss/ks**		

		Class	Fine Amount	Correction date
	not walked during the previous 7 day assessment period. The MDS reflected the resident had limited range of motion in his/her lower legs. The assessment documented the resident as at no risk for pressure ulcer development, even though it also documented the resident had developed a Stage II pressure ulcer between his/her admission to the facility on 10/7/14 and the assessment date of 12/4/14. The MDS identified the treatments to the skin consisted of pressure ulcer care and pressure reducing devices on the bed and chair. The MDS did not reflect a turning/repositioning program or nutrition/hydration program as a treatment. A Braden Scale For Predicting Pressure Sore Risk form revealed staff identified the resident at moderate risk for pressure ulcer development on 10/14/14, 10/22/14, 10/28/14 and 11/4/14. An Initial Plan of Care form dated 10/7/14 included the following interventions for skin integrity: a. Encourage the resident to reposition every 2 hours, assist as needed b. Pressure relieving devices c. Record any areas on skin flow sheet d. Lotion skin two times a day Further review of the initial care plan and/or the resident's record lacked mention of the resident's use of a CAM boot until mentioned in a skin condition report form dated 10/22/14.			

Facility Administrator Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (Supp. 2009).

Iowa Department of Inspections and Appeals
Health Facilities Division
Citation

FC#5660	**Amended on April 16, 2015. Fine amount held in suspension.**			**Date: January 21, 2015**
Touchstone Living Center		**Survey dates: December 22-29, 2015**		
1800 Indian Hills Drive				
Sioux City, Iowa 51104	**Ds/ss/ks**			

		Class	Fine Amount	Correction date
	According to a skin condition report form dated 10/22/14, Resident #4 developed a small scabbed area, less than 1 centimeter (cm) in size on his/her right outer ankle. Staff documented the resident's CAM boot rubbed on the ankle and caused the scab. Staff implemented a new intervention for the resident to only wear the CAM boot during transfers and use a Band-Aid to cover the area. Review of an Impairment of Skin Integrity- Short Term Care Plan form dated 10/22/14 revealed the following: Impaired Skin Integrity, related to internal and external factors, manifested by a disruption of skin surfaces - bruise (staff documented the resident sustained a scab on his/her right ankle, rather than a bruise). The same short term care plan included interventions to check the environment for potential causes for bruises, inspect skin cares with treatment, record changes during treatment and check personal clothing, shoes. jewelry, watch, etc. for potential causes for bruises. A comprehensive care plan, with an initiation date of 10/7/14, contained a focus area for a pressure ulcer related to the resident's CAM boot (even though the pressure ulcer had not developed until 10/22/14). The same care plan included interventions for staff to monitor and report any changes in skin status, completed treatments as ordered and only wear the CAM boot for transfers only. Staff documented in the care plan the resident's podiatrist added more padding to the CAM boot. According to a Skin Condition Report form dated 11/4/14, staff documented the resident sustained a 1.2 x			

Facility Administrator Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (Supp. 2009).

Iowa Department of Inspections and Appeals
Health Facilities Division
Citation

FC#5660	**Amended on April 16, 2015. Fine amount held in suspension.**			**Date: January 21, 2015**
Touchstone Living Center		**Survey dates: December 22-29, 2015**		
1800 Indian Hills Drive				
Sioux City, Iowa 51104	**Ds/ss/ks**			

		Class	Fine Amount	Correction date
	[by] 0.5 cm superficial scabbed area on his/her left outer ankle. An addition Impairment of Skin Integrity- Short Term Care Plan dated 11/7/14, revealed the following: Impaired Skin Integrity, related to internal and external factors, manifested by a disruption of skin surfaces - bruise (staff documented the resident sustained a superficial scab on his/her left ankle, rather than a bruise). The same short term care plan included interventions to check the environment for potential causes for bruises, inspect skin cares with treatment, record changes during treatment, and check personal clothing, shoes. jewelry, watches etc. for potential causes for bruises, arm/leg protectors and evaluate medications for potential cause of bruising. Review of a pocket care plan, (undated and used daily by Certified Nursing Assistants for care instructions) lacked any mention of the resident's pressure ulcers on the resident's ankles or how to position or the need to float the resident's ankles. Resident #4's Medical Provider progress notes included the following information: 11/7/14 - The resident had 2 new wounds on the left ankle and staff reported being unsure as to the cause of the wounds. The medical provider documented the size of the wounds as 1 x [by] 1.1 cm on the left outer ankle and 0.4 x [by] 0.4 cm on the left inner ankle. The provider documented the resident wore a boot on his/her right ankle and made no mention of a wound on the			

Facility Administrator Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (Supp. 2009).

Iowa Department of Inspections and Appeals
Health Facilities Division
Citation

FC#5660	**Amended on April 16, 2015. Fine amount held in suspension.**			**Date: January 21, 2015**
Touchstone Living Center		**Survey dates: December 22-29, 2015**		
1800 Indian Hills Drive				
Sioux City, Iowa 51104	**Ds/ss/ks**			

		Class	Fine Amount	Correction date
	resident's right outer ankle. 11/14/14 - The resident with pressure ulcers on both lower extremities (left inner and outer ankle and the right outer ankle. 12/9/14 - The resident acquired 2 metatarsal (toe) fractures of his/her right foot prior to admission to the facility. According to the progress note, because of the resident's metatarsal fractures, the resident wore a CAM boot (worn to stabilize the foot or ankle) on his/her right foot. 12/12/14 - Pressure wounds to both of the resident's ankles. A Podiatry progress note dated 10/30/14 revealed a Podiatrist documented the resident's CAM boot needed to be correctly applied so no further pressure spots developed. A Podiatry progress note dated 11/26/14 revealed a Podiatrist documented to please make sure the resident's right ankle be offloaded (to decrease pressure on the ankle). Even though the Podiatrist documented to keep the resident's ankle offloaded, record review revealed staff failed to update the resident's care plan or orders to reflect such care. Review of Resident #4's skin report forms revealed the following assessments of the resident's right outer ankle:			

Facility Administrator Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (Supp. 2009).

Iowa Department of Inspections and Appeals
Health Facilities Division
Citation

FC#5660	**Amended on April 16, 2015. Fine amount held in suspension.**			**Date: January 21, 2015**
Touchstone Living Center		**Survey dates: December 22-29, 2015**		
1800 Indian Hills Drive				
Sioux City, Iowa 51104	**Ds/ss/ks**			

		Class	Fine Amount	Correction date
	10/22/14 - 0.3 x [by] 0.3 cm scabbed area 10/28 - 0.3 x 0.3 cm yellow base 10/30 - 0.3 x 0.3 cm scabbed area 11/10 - 1.2 x 1.0 x 0.5 cm with serosanguineous (blood and serous) drainage 11/17 - 0.4 x 0.7 cm with serosanguineous drainage 11/24 - 0.4 x 0.8 cm with serosanguineous drainage 12/5 - 0.2 x 1.0 x 0.2 cm with serosanguineous drainage 12/15 - 0.4 x 0.8 cm with serosanguineous drainage 12/22 - 0.3 x 0.8 cm with serosanguineous drainage Review of Resident #4's skin report forms revealed the following assessments of the resident's left outer ankle: 11/14 - 0.6 x 0.5 cm slough tissue in the center with 1.3 x 1.8 cm red surrounding tissue 11/23 - 0.4 x 0.4 cm open area with red surrounding tissue 12/7 - 0.8 x 0.5 cm (no description of wound) 12/11 - 1 x 0.3 x 0.3 cm - (no description of wound) 12/14 - 1 x 0.5 x 0.3 cm red tissue no drainage 12/23 - 1 x 1 x 0.1 cm red base with no drainage Observations on the following dates revealed the			

Facility Administrator Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (Supp. 2009).

FC#5660	**Amended on April 16, 2015. Fine amount held in suspension.**			**Date: January 21, 2015**
Touchstone Living Center		**Survey dates: December 22-29, 2015**		
1800 Indian Hills Drive				
Sioux City, Iowa 51104	**Ds/ss/ks**			
		Class	**Fine Amount**	**Correction date**
	following: 12/22/14 at 12:55 P.M. - The resident lay in bed with both legs in an outward position and both feet and ankles sitting directly on a bed pillow under the resident's feet. Ongoing observation revealed Staff H, CNA (certified nursing assistant) and Staff I, Licensed Practical Nurse /LPN, transferred the resident to a recliner, put the foot rest in an upward position, place a bed pillow on top of the footrest and positioned both of the resident's feet and ankles in an outward position. Both of the resident's feet and ankles sat directly on the bed pillow not off-loaded or floated. 12/22/14 at 2:45 P.M. - The resident remained in his/her recliner chair and both feet and ankles lay directly on a bed pillow under his/her feet. Staff I placed a dressing over the resident's right ankle and at the conclusion, left both of the resident's feet/ankles in an outward position directly on the bed pillow under his/her feet and not offloaded. 12/22/14 at 3:45 P.M. - The resident sat in a recliner chair in his/her room and both feet and ankles lay in an outward position directly on a bed pillow. 12/23/14 at 6:35 A.M. - The resident lay in bed and both feet and ankles lay in an outward position directly on a bed pillow. Ongoing observation revealed Staff J, LPN completed a dressing change on the resident's left ankle. At the conclusion of the dressing change, Staff J positioned the resident's feet and ankles in an outward position directly on a bed pillow under his/her feet.			

Facility Administrator Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (Supp. 2009).

FC#5660	**Amended on April 16, 2015. Fine amount held in suspension.**		**Date: January 21, 2015**
Touchstone Living Center		**Survey dates: December 22-29, 2015**	
1800 Indian Hills Drive			
Sioux City, Iowa 51104	**Ds/ss/ks**		

		Class	Fine Amount	Correction date
	12/14/14 at 8:10 A.M. - The resident lay in bed and the resident's left heel and outer ankle sat directly on the bed and the resident's right foot and ankle sat directly on a bed pillow. During telephone interview on 12/23/14 at 1:00 P.M. Resident #4's Medical Provider stated she expected staff to float the resident's feet and ankles over a pillow so his/her feet did not directly rest on a surface to cause pressure. During telephone interview on 12/14/14 at 8:10 A.M., the resident's Podiatrist's nurse relayed a message from the Podiatrist and stated the facility needed to provide the resident with a pressure relieving boot or offload the resident's ankles in another manner. On 12/29/14 at 1:45 P.M., the facility Director of Nursing (DON) was interviewed and confirmed she expected staff to place the resident's heels/ankles in a floated position. 2. According to a Physician's Order form dated as of 12/2/14, Resident #1's diagnosis included lupus, stress incontinence, edema and neuropathy. The MDS assessment dated 10/19/14 identified the resident's cognition as fully intact and revealed the resident required extensive assistance from staff with bed mobility (even though the resident declined to sleep in a bed and had no bed in his/her room), transfers, walking in his/her room and toilet assistance. The MDS revealed staff assessed the resident without any type of ulcer, but rather moisture associated skin damage.			

Facility Administrator Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (Supp. 2009).

Iowa Department of Inspections and Appeals
Health Facilities Division
Citation

FC#5660	**Amended on April 16, 2015. Fine amount held in suspension.**	**Date: January 21, 2015**
Touchstone Living Center		**Survey dates: December 22-29, 2015**
1800 Indian Hills Drive		
Sioux City, Iowa 51104	**Ds/ss/ks**	

		Class	Fine Amount	Correction date
	Review of Resident #1's care plan included the following information: a. Assess my skin frequently. b. The resident refused to sleep in a bed and only slept in a recliner. A Skin Condition Report form dated 12/3/13; revealed staff assessed the resident with a 2 x [by] 1 cm red, dry rough area on his/her left buttock area. Further review of the skin condition report forms included the following assessments of the resident's left buttock (note: not all assessments are included below): 12/6/13 - 1.7 x [by]1.7 cm dry and flaky 12/20/13 - 1.5 x 1.5 cm scabbed, rough and dry 1/14/14 -1 x .5 cm open area 2/11/14 - 1.4 x 1.1 cm open area 2/28/14 - 1.5 x 1 cm rough and dry, not open 3/7/14 - 1.5 x 1 cm red , not open 3/21/14 - 1.5 x 1 cm red, dry and rough 4/4/14 - 1.5 x 0.8 cm , red , dry and rough 4/11/14 - 3 x 1 cm , dry, rough and red skin 5/2/14 - 1.5 x 1 cm rough dry skin 5/9/14 - 3 x 1 cm discolored, no open area			

Facility Administrator Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (Supp. 2009).

Iowa Department of Inspections and Appeals
Health Facilities Division
Citation

FC#5660	**Amended on April 16, 2015. Fine amount held in suspension.**			**Date: January 21, 2015**
Touchstone Living Center		**Survey dates: December 22-29, 2015**		
1800 Indian Hills Drive				
Sioux City, Iowa 51104	**Ds/ss/ks**			
		Class	**Fine Amount**	**Correction date**
	5/30/14 - 0.5 x 0.5 cm pink center with a 1 x 1 cm raised dry rough area 6/6/14 - 2.5 x .5 cm pink, dry, rough and intact 6/20/14 - 2 x 1 cm dry, rough skin 7/2/14 - 2 x 1 cm dry rough skin with a 0.2 cm open red area 8/1/14 - 1 x 1 cm red 9/5/14 - 1 x .5 cm pink and rough 10/3/14 - 1 x 0.5 cm pink and rough 11/7/14 - 3 x 2 cm dry, rough raised area 11/28/14 - 3 x .5 cm dry, rough raised area 12/7/14 - 3 x 0.5 cm dry and rough 12/14/14 - 3 x 4 cm red with 4, 0.5 cm open red areas 12/19/14 - small red open areas with pink scratches (no measurements documented) 12/26/14 - reddened, open scratches (no measurements documented). Review of a Medical Provider progress note dated 12/10/14 revealed Resident #1 visited a wound clinic for a skin ulcer on his/her abdomen and while there reported he/she had pain on the left buttock. The Medical Provider documented the resident had a bleeding ulcer in the same area and wanted the area			

Facility Administrator Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (Supp. 2009).

FC#5660	**Amended on April 16, 2015. Fine amount held in suspension.**		**Date: January 21, 2015**
Touchstone Living Center		**Survey dates: December 22-29, 2015**	
1800 Indian Hills Drive			
Sioux City, Iowa 51104	**Ds/ss/ks**		

		Class	Fine Amount	Correction date
	checked. The Medical Provider assessed the resident with a left buttock friction and shear ulcer and measured the ulcer at 3.5 x 3 x 0.1 cm in size. Review of a Medical Provider progress note dated 12/17/14 revealed Resident #1 revisited the wound clinic and the Medical Provider assessed the resident's left buttock friction and shear ulcer as 3.5 x 0.2 x 0.1 cm in size. Observation on 12/22/14 at 9:45 A.M. revealed Resident #1 in his/her room in a recliner. Further observation revealed no pressure reducing (PR) cushion in the seat of the recliner. Observation revealed a PR cushion in his/her wheelchair. Observation on 12/23/14 at 6:35 A.M., revealed Resident #1 asleep in his/her recliner with no PR cushion in the seat of the recliner. At 7:15 AM and 8:20 AM the resident continued to sit in his/her recliner in his/her room with no PR cushion in the seat of the recliner. During an interview on 12/23/14 at 2:05 P.M., the facility's DON stated she felt at one time Resident #1 had a PR cushion in the seat of his/her recliner and the resident hadn't liked it. The DON offered no documentation in regards to the matter. The DON stated the facility had no repositioning schedule for the resident to be assisted and/or reminded to change position or offload from his/her buttocks. During an interview on 12/23/14 at 10:10 A.M., the resident reported having no pain in his/her left buttock			

Facility Administrator Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (Supp. 2009).

FC#5660	**Amended on April 16, 2015. Fine amount held in suspension.**		**Date: January 21, 2015**
Touchstone Living Center		**Survey dates: December 22-29, 2015**	
1800 Indian Hills Drive			
Sioux City, Iowa 51104	**Ds/ss/ks**		

		Class	Fine Amount	Correction date
	area. The resident stated not knowing the reason for no PR cushion in the sear of his/her recliner and the need had never been discussed. The resident stated that a PR cushion in his/her recliner may feel good. The resident confirmed s/he did not get up from his/her chair every 2 hours and stated he/she could mover his/her hips from side to side while sitting in his/her recliner. Observation on 12/24/14 at 10:10 A.M. revealed the resident gone from his/her room and a PR cushion in the seat of his/her recliner. During a telephone interview on 12/24/14 at 9:25 A.M., the resident's wound clinic Medical Provider's nurse reported the Medical Provider's expectations included a PR cushion in the resident's recliner chair and wheelchair. The nurse reported a PR cushion in a recliner chair as well as a wheelchair aided in the healing and prevention of a buttock ulcer. During an interview on 12/14/14 at 10:55 A.M., the resident reported not knowing where the PR cushion in the seat of his/her recliner came from. The resident reported with the PR cushion in the seat of her recliner he/she no longer needed to slide in and out of his/her recliner to stand up. During the same interview, the resident reported his/her emergency contact purchased the PR cushion in the seat of his/her wheelchair. During telephone interview on 12/29/14 at 8:45 A.M., the resident's emergency contact confirmed purchasing a new PR cushion for the seat of the resident's wheelchair approximately 1 month prior. The Emergency Contact described the previous PR cushion in the seat of the			

Facility Administrator Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (Supp. 2009).

FC#5660	**Amended on April 16, 2015. Fine amount held in suspension.**		**Date: January 21, 2015**
Touchstone Living Center		**Survey dates: December 22-29, 2015**	
1800 Indian Hills Drive			
Sioux City, Iowa 51104	**Ds/ss/ks**		

		Class	Fine Amount	Correction date
	resident's wheelchair as in bad shape and warped. The Emergency Contact reported not ever seeing a PR cushion in the seat of the resident's recliner chair. During an interview on 12/24/14 at 8:35 A.M., Staff M, LPN MDS Coordinator stated the standard of practice in the facility was to provide PR cushions in the chairs of residents. During an interview on 12/29/14 at 2:00 P.M., the facility DON reported staff placed a PR cushion in the seat of the resident's recliner after the surveyor inquired the cushion. The DON stated staff had no knowledge of the resident's Emergency Contact purchasing a new PR cushion for his/her wheelchair. Review of the resident's record lacked any intervention or documentation for the use of PR cushions in both the resident's wheelchair and/or his/her recliner to prevent and/or heal a pressure ulcer (from sheer) and lacked intervention or documentation to ensure the staff transferred without sheering the skin and interventions to off load the buttock. **FACILITY RESPONSE:**			

Facility Administrator Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (Supp. 2009).