Citation Numb #10400	er:		Date: June 6, 2024			2024
Facility Name: Windsor Place			Survey Dates: May 19, 2024 – May 22, 2024			024
Facility Address 900 South Ston Sigourney, low		СР				
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date
58.43(9)	58.43(9) Allegations of Allegations of depender and investigated pursua and 481—Chapter 52. (DESCRIPTION: Based on observation, or review, and staff and refailed to report an allega Agency when a staff me with dignity and respect #1) for 1 of 2 residents abuse. The facility report in the facili	ant adult abuse shall be reported ant to lowa Code chapter 235E I, II, III) clinical record review, policy sident interviews, the facility ation of abuse to the State ember failed to treat a resident during positioning (Resident reviewed for an allegation of orted a census of 23 residents. Set (MDS) assessment tool, agnoses for Resident #1 which tual disabilities, conduct mood dysregulation disorder ed by ongoing irritability, anger, mper outbursts). The MDS bited physical behavioral and others such as hitting, abbing which occurred on 4-6 eview period and listed her		\$500.0	0	Upon Receipt
						Page 1 of 1

Facility Administrator

Date

Citation Numb #10400	er:		Date: June 6, 2024			
Facility Name: Windsor Place	Senior Living		Survey Dates: May 19, 2024 – May 22, 2024			024
Facility Address 900 South Stor Sigourney, low		СР				
Rule or Code Section	Natur	e of Violation	Class	Fine A	mount	Correction date
	comforted by being on the herself on the floor for compared to the self on the floor for compared to the self on the floor for compared to the process of the self	tigation, dated 5/15/24, written ing (DON) stated staff reported grassistant (CNA) "yanked" the od and was choking her. Staff arted to go forward in her chair sk of her pants and sweatshirt bed the upper part of the rhand. The facility carried out drapab the shoulder rather than he facility investigation lacked resident interviews conducted. The facility investigation lacked resident interviews conducted.				Page 2 of 1

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: #10400			Date: June 6,	2024
Facility Name: Windsor Place Senior Living		Survey Dates: May 19, 2024 – May 22, 2024		
Facility Address/City/State/Zip 900 South Stone Street Sigourney, Iowa 52591	СР			
Rule or Code Natu	re of Violation	Class	Fine Amount	Correction date
queried with regard to Resident #1. She state and no one in the facil regard to Resident #1 typical nursing home rechallenging. She state and they just went with a lot to do with the sees supervision and she (see supervision and she (see supervision and she (see supervision and she (see supervision and she see see see see see see see see see	the incident with Staff A and ed Staff A was new on the floor ity received any training with Staff D stated she was not a esident and was a lot more ed no one received any training in their first instincts and this had enario. Resident #1 required 1:1 Staff D) was charting on the sident stated that Resident #1 fher chair. Staff A had her chair and she was on the edge and he end the hood of her shirt. Staff D ed her pants and the resident her and she swung and hit Staff noticed in the midst of this that and thought this was why she chair. Staff D stated she did not ying to harm the resident, he just owledge. Staff D stated the so nher neck from the shirt's Staff A continued to work the so the following Friday. In., the Administrator stated with with Staff A, she received a was a possible abuse. She and completed a thorough ted she was at the facility within dent did not have any red marks use". She stated they educated by prevent a fall and stated they			Page 3 of 1

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 #10400	er:		Date: June 6, 2024			2024
Facility Name: Windsor Place S	Senior Living		Survey Dates: May 19, 2024 – May 22, 2024			024
900 South Ston Sigourney, lowar		СР				
Rule or Code Section	Natur	e of Violation	Class	Fine A	mount	Correction date
	Staff A returned to work needed (prn) so he coul The Administrator stated team with the entire involved would not report an allest signs of abuse and she concern. On 5/19/24 at 3:26 p.m. heard of the abuse allegt assessed the resident a fine. She stated the resident and Staff A grabbe would not fall face forward completed education and mentoring the Administr no harm so put it in a "sidid not have any marks and could return to the fine she did not talk to any of the staff members if the witnesses. She stated if they had had concerns they would report anything on 5/19/24 at 3:54 p.m. Practical Nurse (LPN) signal states and the staff at 3:54 p.m. Practical Nurse (LPN) signal states and staff A, Resident #1 had	and she acted and appeared sident was scooting out of her ed the back of her shirt so she ard. She immediately a called the person who was rator and he stated there was oft file. She stated the resident as She stated Staff A was prn facility any time. She stated the resident stated the residents and did not ask re were any resident she did not ask other residents so with Staff A. The DON stated				Page 4 of 1
Facilit	y Administrator	Dat	 e			C

Citation Numb	er:		Date: June 6, 2024			2024
Facility Name: Windsor Place			Survey Dates: May 19, 2024 – May 22, 2024			024
Facility Addre 900 South Stor Sigourney, low		СР				
Rule or Code Section	Natur	e of Violation	Class	Fine A	Mount	Correction date
	#1 sat on the very edge propelled herself with he On 5/20/24 at 8:18 a.m. was doing 1:1 with Resi fall out of the chair and her back from her pants incident the Administrat not to hold residents that The facility policy, Residented the right to a discount of the privacy and confident on 5/22/24 at 2:14 p.m. an allegation of abuse, situation and carry out in parties. She stated staf dignity and respect and the residents. The undated facility policy and the privacy and the policy and the privacy and the privacy and the policy and the privacy and the privacy and the policy and the privacy and the priv	via phone Staff A stated he dent #1 and she was about to he tried to prevent it by pulling and shirt. He stated after the or and DON explained to him at way. dent Rights, revised October shall treat all resident with dignity. Resident rights ignified existence and the right iality. , the Administrator stated after				Page 5 of 1

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 #10400	er:		Date: June 6, 2024			2024
Facility Name: Windsor Place			Survey Dates: May 19, 2024 – May 22, 2024			024
Facility Address 900 South Ston Sigourney, lower		СР				
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date
58.43(9)	58.43(9) Allegations of Allegations of depender	nt adult abuse shall be reported ant to lowa Code chapter 235E	II			
	DESCRIPTION:					
	review, and staff and re failed to complete a tho immediate protection fo an allegation of abuse (member and for an alleg	clinical record review, policy sident interviews the facility rough investigation and ensure r 1 of 2 residents reviewed for Resident #1) from a staff gation of abuse from a fellow The facility reported a census				
	Findings:					
	dated 4/18/24, listed dia included severe intellect disorder, and disruptive (a condition characterizer and frequent, intense the stated the resident exhibits symptoms directed toward kicking, pushing, and gr	Set (MDS) assessment tool, agnoses for Resident #1 which tual disabilities, conduct mood dysregulation disorder ed by ongoing irritability, anger, emper outbursts). The MDS bited physical behavioral ard others such as hitting, rabbing which occurred on 4-6 eview period and listed her apaired.				
						Page 6 of 1 !
Facilit	y Administrator	 Dat	e			

Citation Numb	er:		Date: June 6, 2024			2024
Facility Name: Windsor Place	Senior Living		Survey Dates: May 19, 2024 – May 22, 2024		024	
Facility Address 900 South Ston Sigourney, Iowa		СР				
Rule or Code Section	Nature	e of Violation	Class	Fine A	Amount	Correction date
	comforted by being on therself on the floor for contents of the self on the floor for contents. An untitled facility investibly the Director of Nursing Staff A Certified Nursing resident back by her how A stated the resident stand he grabbed the back with one hand and grab sweatshirt with the other education that he should the neck of the shirt. The documentation of other On 5/19/24 at 9:25 a.m. close proximity to Staff of the shirt of the hood of her shirt her. He stated the residuat him. He stated Staff on 5/19/24 at 12:50 p.m. Nursing Assistant (CNA scoot Resident #1 back by the hood (of her shirt and swung to hit Staff A	tigation, dated 5/15/24, written ng (DON) stated staff reported g Assistant (CNA) "yanked" the od and was choking her. Staff arted to go forward in her chair sk of her pants and sweatshirt bed the upper part of the r hand. The facility carried out d grab the shoulder rather than he facility investigation lacked resident interviews conducted.				
				11		Page 7 of 1 !
Facilit	y Administrator	Dat	e			

Citation Numb	er:	Date: June 6, 2024			2024	
Facility Name: Windsor Place	Senior Living		Survey Dates: May 19, 2024 – May 22, 2024			024
Facility Address 900 South Stor Sigourney, low		СР				
Rule or Code Section	Nature	e of Violation	Class	Fine A	mount	Correction date
	queried with regard to the Resident #1. She stated and no one in the facility regard to Resident #1. typical nursing home reschallenging. She stated and they just went with a lot to do with the scensupervision and she (Steouch and another resided was about to fall out of laid all the way back and had her by her pants an jumped up and grabbed tried to get Staff A off her D in the nose. Staff D in the resident was wet an tried to get out of her cheel like Staff A was tryill lacked training and known resident had red marks zipper. Staff D stated S rest of the shift and also on 5/19/24 at 3:12 p.m. regard to the situation with phone call that there was stated they came in and investigation. She stated minutes and the resident "visible sights of abusting the stated to the sights of abusting the stated the sights of abusting the stated to the sights of abusting the stated to the sights of abusting the stated the stated the stated the sights of abusting the stated the sights of abusting the stated to the sights of abusting the stated to the sights of abusting the stated to the stated the s	, the Administrator stated with vith Staff A, she received a as a possible abuse. She				Page 8 of 1

Facility Administrator

Date

Citation Number #10400	er:		Date: June 6, 2024			2024
Facility Name: Windsor Place S	Senior Living		Survey Dates: May 19, 2024 – May 22, 2024			024
Facility Address 900 South Ston Sigourney, Iowa		СР				
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date
	Staff A returned to work needed(prn) so he could The Administrator stated team with the entire involved would not report an allest signs of abuse and she concern. On 5/19/24 at 3:26 p.m. heard of the abuse allegt assessed the resident a fine. She stated the resident and Staff A grabbe would not fall face forward completed education and mentoring the Administr no harm so put it in a "sidid not have any marks and could return to the fine she did not talk to any of the staff members if the witnesses. She stated if they had had concerns they would report anything on 5/19/24 at 3:54 p.m. Practical Nurse (LPN) signal staff A, Resident #1 had	and she acted and appeared sident was scooting out of her ed the back of her shirt so she ard. She immediately and called the person who was rator and he stated there was oft file. She stated the resident and She stated Staff A was prn facility any time. She stated other residents and did not ask re were any resident she did not ask other residents so with Staff A. The DON stated				Page 9 of 1
Facilit	y Administrator	Dat				-

Facility Name: Windsor Place Senior Living Facility Address/City/State/Zip 900 South Stone Street Sigourney, lowa 52591 CP Rule or Code Section Observation on 5/19/24 at 4:10 p.m. revealed Resident #1 sat on the very edge of her wheelchair seat and propelled herself with her feet. On 5/20/24 at 8:18 a.m. via phone Staff A stated he was doing 1:1 with Resident #1 and she was about to fall out of the chair and he tried to prevent it by pulling her back from her pants and shirt. He stated after the incident the Administrator and DON explained to him not to hold residents that way. The facility policy, Resident Rights, revised October 2022, stated employees shall treat all resident with kindness, respect, and dignity. Resident rights included the right to a dignified existence and the right	ates: 024 – May 22, 2	024	
Rule or Code Section Observation on 5/19/24 at 4:10 p.m. revealed Resident #1 sat on the very edge of her wheelchair seat and propelled herself with her feet. On 5/20/24 at 8:18 a.m. via phone Staff A stated he was doing 1:1 with Resident #1 and she was about to fall out of the chair and he tried to prevent it by pulling her back from her pants and shirt. He stated after the incident the Administrator and DON explained to him not to hold residents that way. The facility policy, Resident Rights, revised October 2022, stated employees shall treat all resident with kindness, respect, and dignity. Resident rights			
Code Section Observation on 5/19/24 at 4:10 p.m. revealed Resident #1 sat on the very edge of her wheelchair seat and propelled herself with her feet. On 5/20/24 at 8:18 a.m. via phone Staff A stated he was doing 1:1 with Resident #1 and she was about to fall out of the chair and he tried to prevent it by pulling her back from her pants and shirt. He stated after the incident the Administrator and DON explained to him not to hold residents that way. The facility policy, Resident Rights, revised October 2022, stated employees shall treat all resident with kindness, respect, and dignity. Resident rights			
#1 sat on the very edge of her wheelchair seat and propelled herself with her feet. On 5/20/24 at 8:18 a.m. via phone Staff A stated he was doing 1:1 with Resident #1 and she was about to fall out of the chair and he tried to prevent it by pulling her back from her pants and shirt. He stated after the incident the Administrator and DON explained to him not to hold residents that way. The facility policy, Resident Rights, revised October 2022, stated employees shall treat all resident with kindness, respect, and dignity. Resident rights	Fine Amount	Correction date	
to privacy and confidentiality. On 5/22/24 at 2:14 p.m., the Administrator stated after an allegation of abuse, they should assess the situation and carry out immediate protection of the 2 parties. She stated staff should treat residents with dignity and respect and should speak and engage with the residents. b. A 12/5/23 Nurses Note stated the resident refused to keep clothes on. A 12/19/23 Nurses Notes stated the resident refused staff assistance to put on a brief and pants. A 12/27/23 Behavior Note stated the resident periodically took her clothes off and staff covered her with a blanket.		Page 10 of 1	

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

Facility Name: Windsor Place Senior Living Facility Address/City/State/Zip 900 South Stone Street	СР	Survey Da May 19, 20	ates: 024 – May 22, 20)24
900 South Stone Street	СР			
Sigourney, Iowa 52591				
Rule or Code Nature Section	e of Violation	Class	Fine Amount	Correction date
leave her pants on. A 3/13/24 Nurses Note so Assistant (CMA) reporter resident's (#1) room pull resident exiting the resident exiting the resident exiting the resident to the resident's room from the waist up. A 3/13/24 Incident Auditions the heard the curtains pand observed a male research existent #1 was naked did not realize this need nurse carried out educated. The MDS assessment diagnoses for Resident adepression, and chronic disease. The MDS lister for Mental Status (BIMS indicating intact cognition of the company of the season of the company of	from the waist up. The CMA ed reported right away and the tion regarding this. Int tool, dated 2/1/24, listed #3 which included anxiety, obstructive pulmonary ed the resident's Brief Interview) score as 15 out of 15, n. Interview of the resident was nother resident's room when ed. A Certified Nursing she informed the resident that behavior and to please respect			Page 11 of 1
Facility Administrator	Dat			J

Citation Number: #10400			Date: June 6,	2024
Facility Name: Windsor Place Senior Living		Survey Dates: May 19, 2024 – May 22, 2024		
Facility Address/City/State/Zip 900 South Stone Street Sigourney, Iowa 52591	СР			
Rule or Code Nat Section	ure of Violation	Class	Fine Amount	Correction date
female resident a drin not feed or provide dristated the resident set this particular resident. An 11/21/23 Nurses it fellow female resident encouraged the resident of invited into her rolleave. This resident with female resident a glasses resident that he had a feeding or giving drinstresident screamed "in An 11/29/23 Nurses it resident feeding a felleducated him it was used to resident a female residents. A 12/17/23 Nurses it residents. A 12/17/23 Nurses it residents. A 3/5/24 Behavior Notentering a resident's pulled the curtain back not go in her room or	Interestated the resident gave at a k and the nurse educated him to make to other residents. The note emed to have "taken a liking" to it. Interestated the resident was in a description of the stated the resident was in a description of the stated the resident was also noted to be giving the set of juice and staff reminded the description of the set of the stated staff observed the conceived the set of the stated staff observed the set of the stated staff observed the set of the stated the resident and the nurse make for him to feed other. Interestated the resident walked ent at lunch and asked staff if the land ran his hand over her. It is stated the resident kept of the stated the residen			Page 12 of 1
				Page 12 of 1

Facility Administrator

Date

Citation Number: #10400			Date: June 6, 2024		2024	
Facility Name: Windsor Place Senior Living			Survey Dates: May 19, 2024 – May 22, 2024			
Facility Address/City/State/Zip 900 South Stone Street Sigourney, Iowa 52591		СР				
Rule or Code Section	Natur	e of Violation			Correction date	
	to take another resident him this was not allowed resident to her room to desident to her room to desident to her room to desident had a history of rooms and lacked direct related to his supervision. On 5/21/24 at 8:36 a.m. stated Staff J heard the walked out of Resident naked which wasn't sup She stated she didn't know they had to protect is situation in as abuse an stated it was upsetting the mental capacity of a sm sheriff's office came and ticket for trespassing but they found he had a way was arrested. She stated emergency 3-day dischard the stated in the stated emergency 3-day dischard the stated she did not reshe did within the hour.	/24 Nurses Note stated the resident attempted another resident to her room and staff informed s was not allowed and a CNA would take the nt to her room to dress her. sident's Care Plan lacked documentation the nt had a history of entering other resident's and lacked direction to staff regarding guidance				Page 13 of 15
Facilit	y Administrator	Dat	 e			

Citation Number: #10400					Date: June 6,	2024
Facility Name: Windsor Place Senior Living			Survey Dates: May 19, 2024 – May 22, 2024			
Facility Address/City/State/Zip 900 South Stone Street Sigourney, Iowa 52591		СР				
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date
	staff member that was. She stated after she (Staff J) informed the DON, the residents were kept apart. On 5/21/24 at 12:24 p.m. Staff H Licensed Practical Nurse (LPN) stated there were a couple female residents Resident #3 was friendly to and on one instance he took Resident #13 and said he was going to assist her into her pajamas. She stated this resident was not cognitively intact and she had to intervene. On 5/21/24 at 12:42 p.m., the DON stated she was not aware he tried to assist a resident in getting ready for bed. She stated she would want staff to notify her right away if he was exiting Resident #1's room. She stated she did not locate a timeline for the day in question but would continue looking. She stated she was not aware that he rubbed another resident's shoulders and stated she could not care plan for issues she did not know about. On 5/22/24 at 2:14 p.m., the Administrator stated after an allegation of abuse, they should assess the situation and carry out immediate protection of the 2 parties. On 5/22/24 at 2:50 p.m., the DON stated if she had known about Resident #3 being in other resident rooms, she would have care planned and directed staff to know what he was doing on a regular basis. The facility policy, Resident Rights, revised October					
						Page 14 of 1 9

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: #10400				Date: June 6, 2024	
Facility Name: Windsor Place Senior Living		Survey Dates: May 19, 2024 – May 22, 2024			024
Facility Address/City/State/Zip 900 South Stone Street Sigourney, Iowa 52591	СР				
Rule or Code Nature Section	e of Violation	Class	Fine A	Amount	Correction date
carry out timely and thor reports and allegations of	use", stated the facility would rough investigations of all of abuse and stated the alleged diately be removed and the				
Facility Administrator					Page 15 of 1 8