

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

Citation Number: #5886	Fine amount reduced by 35% to \$4,062.50 on November 03, 2022 pursuant to Iowa Code Section 135C.43A	Date: October 19, 2022
Facility Name: Harmony House Health Care Center	Survey Dates: September 26-October 6, 2022	
Facility Address/City/State/Zip 2950 West Shaulis Road Waterloo, IA 50701	DC	
Rule or Code Section	Nature of Violation	Class
		Fine Amount
		Correction date

58.28(3)e	<p>481—58.28(135C) Safety. The licensee of a nursing facility shall be responsible for the provision and maintenance of a safe environment for residents and personnel. (III)</p> <p>58.28(3) Resident safety.</p> <p>e. Each resident shall receive adequate supervision to protect against hazards from self, others, or elements in the environment. (I, II, III)</p> <p>DESCRIPTION:</p> <p>Based on observation, clinical record review, interviews, and facility policy review the facility failed to ensure one (1) of five (5) residents received adequate supervision to protect against hazards in the environment, (Resident #5). Resident interview, record review and staff interviews revealed Resident #5 required assistance of two staff with a mechanical stand lift for transfer. On 8/15/22, one nursing staff person assisted Resident #5 to transfer without a gait belt. The resident lost balance and fell to the floor, required transfer to the local emergency room (ER) where determined resident had sustained a lower left leg fracture. The facility reported a census of 40 residents.</p> <p>Findings include:</p> <p>The Minimum Data Set (MDS) assessment with a reference date of 8/12/22 for Resident #5 documented</p>	I	\$6,250.00	UPON RECEIPT
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Facility Administrator

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	<p>a score of 13 of 15 on Brief Interview for Mental Status (BIMS) test which indicated intact cognition. The resident had diagnoses that included dependence on respirator, tracheostomy, hemiplegia and required extensive assistance of two staff for bed mobility and transfer. The resident had no falls since reentry.</p> <p>A Nursing Care Plan with a target date of 5/26/22 identified a focus area: ADL (Activities of Daily Living) need assistance with ADL's related to history of stroke, respiratory failure, and weakness with a goal to participate in cares and make needs known, and directed the following interventions: Transfer with assist of 2 and pivot disc.</p> <p>A facility memo dated 6/21/22 from Occupational Therapy (OT) to Nursing regarding transfers for Resident #5 directed the following: Discontinue use of pivot disc, transfer with EZ stand (mechanical lift stand) and assist of two for all transfers, and hoyer lift may be utilized at the nurse's discretion.</p> <p>A Fall Risk Assessment dated 4/23/21 documented a score of 14 which indicated a moderate risk of falls.</p> <p>A facility Incident Report documented a witnessed fall on 8/15/22 at 1:52 p.m. The report documented Resident #5 was transferred from wheelchair to bed when lost balance and fell. The report documented in error the resident was transferred by 2 staff. Resident complained of severe pain to left lower extremity, unable to bear weight. Facility provider assessed.</p>			
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	<p>An Emergency Department Discharge Instructions dated 8/15/22 at 7:13 p.m. for Resident #5 documented a diagnosis of closed fracture of epiphyseal plate of proximal tibia (shin bone) and a fall from standing.</p> <p>An X-ray Report dated 8/15/22 at 4:57 p.m. documented a probable nondisplaced transverse fracture of the proximal left tibial region.</p> <p>In an interview on 9/28/22 at 12:20 p.m. Resident #5 was observed to have an immobilizer brace on the left leg. Resident #5 stated that a nurse had transferred her as a one person and she fell and broke her leg. Resident #5 denied that she had alerted the caregiver at the time of transfer that she required a lift stand. Resident #5 stated they usually use a lift with two staff.</p> <p>In an interview on 9/29/22 at 1:00 p.m., Staff A, Certified Nursing Assistant (CNA) stated on 8/15/22 Resident #5 had requested to return to bed from her wheelchair. Staff A positioned her wheelchair next to the bed and lifted under the residents arms. Staff A confirmed she had not used a gait belt. During transfer Resident #5 slumped to the floor but she still had ahold of resident under her arms. Recalled that Resident #5 complained of pain right away. Stated that she had not checked the care plan, was new at the facility and had been oriented by staff who had not used a lift to transfer Resident #5. Confirmed that she had been informed after the incident that Resident #5 was a two person lift stand transfer and had been counseled to always follow the care plan and/or PT</p>			
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	<p>(physical therapy)/nursing recommendations.</p> <p>In an interview on 9/29/22 at 1:25 p.m., Staff B, Licensed Practical Nurse (LPN) stated she had been called to Resident #5's room after she had fallen. Recalled that she was surprised right away when she entered the room and there wasn't a lift in the room. Confirmed that there were two CNA's in the room when she entered so she had assumed that the resident had been transferred by both staff, became aware later that only Staff A had transferred Resident #5. Stated in house nurse manager had confirmed transfer was directed to be a mechanical stand lift with two staff assistance. Confirmed no gait belt on resident. Responded the expectation a gait belt should be used for all assisted transfers.</p> <p>In an interview on 9/29/22 at 1:25 p.m. the Director of Nursing confirmed the expectation for resident transfers was to follow the care plan and PT/Nursing directives. Additionally would expect staff to use a gait belt for all staff assisted transfers and ambulation.</p> <p>Review of a Facility Verbal Counseling dated as signed on 8/15/22 revealed Staff A failed to exercise safety measures and adhere to safety precautions. Cited Staff A transferred Resident #5 as a stand pivot transfer without a gait belt. Resident ended up on the floor. Going forward expected to transfer all residents as care planned or per PT/Nursing recommendations. Clarified Resident #5 was to be transferred via ez-stand with assist of 2 staff.</p>			
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	Review of a facility policy titled, Tansfer/Gait Belts/Ambulation and Use of Safety Straps/Belts last reviewed on 11/08 directed gait belts will be used on residents who require assistance with transfers and/or ambulation when mechanical lifting devices are not used.			
	FACILITY RESPONSE:			

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