Number 6103]		t date 2, 2023	
Facility name Countryside Hea	llth Care Center		Survey date April 3, 202	es 3 - April 13, 20)23
Facility address 6120 Morningsi	de Avenue				
City Sioux City		JB			
Rule or Code Section	1	Nature of Violation	Class	Fine Amount	Correction Date
56.6(1)	56.6(1) <i>Treble fin</i> director of the de appeals shall treb 481—56.3(135C) class I or class II violati period, if a citatic	Treble and double fines. es for repeated violations. The partment of inspections and le the penalties specified in rule for any second or subsequent on occurring within any 12-month on was issued for the same class I n occurring within that period and essed therefor.	1	\$ 25,500 (8500x3) Trebled Held in Suspension	Upon Receipt
58.19(2)j	residents. The residents. The residents. The residents. The resident shall provide, as a nursing services u qualified nurses with these rules: 58.19(2) Medicat <i>j.</i> Provision of account for a adverse symptom) Required nursing services for sident shall receive and the facility appropriate, the following required under the 24-hour direction of with ancillary coverage as set forth <i>ion and treatment.</i> urate assessment and timely Ill residents who have an onset of as which represent a change in al, or physical condition. (I, II, III)			
	DESCRIPTION				
	policy review the intervene when a condition for 2 of	review, staff interview and facility facility failed to assess and resident had a change of 10 residents reviewed (Resident #12). The lack of assessment and			

Number 6103					Report May 12	
Facility name Countryside Hea	alth Care Center		Survey date April 3, 202		13, 20	23
Facility address 6120 Morningsi						
City Sioux City		JB				
Rule or Code Section	1	Nature of Violation	Class	Fine Amou	unt	Correction Date
		ulted in harm to Resident #12. The a census of 53 residents.				
	Findings include:					
	assessment dated Interview for Men indicating intact of diagnoses of diab heart failure, sep the liver, and pull pressure affecting that Resident #12	Minimum Data Set (MDS) d 3/1/23 identified a Brief ntal Status (BIMS) score of 15, cognition. The MDS included betes, cellulitis (skin infection), sis (blood infection), cirrhosis of monary hypertension (high blood g the lungs). The MDS indicated 2 required extensive assistance ed mobility, dressing, toilet use, iene.				
	progress notes da indicated the Plan from the Wound her Primary Care any other medica listed that Reside wraps used to con compression to h #12 worked with Therapy (OT) Reg nursing home. Th	ound and Hyperbaric Center ated 10/22/21 at 9:00 AM in as Resident #12 to discharge Care Center and to follow-up with Provider (PCP) as needed or for al concerns. The Edema Control int #12 wore a Compreflex (velcro introl swelling or edema) for er bilateral lower legs. Resident a contracted Occupational istered/Licensed (R/L) at the be order directed to care at the obedema continues with inps.				

Number 6103					eport (ay 12,	
Facility name Countryside Heal	th Care Center		Survey dates April 3, 2023		3, 202	23
Facility address 6120 Morningsid	e Avenue					
City Sioux City		JB				
Rule or Code Section	N	lature of Violation	Class	Fine Amoun	t	Correction Date
	Resident #12 had skin's integrity due lymphedema. The for Occupational T per orders. The N Weekly Nur displayed that Res Assessment revea right lower front I Resident had bilat due to cellulitis. T areas as not new f The N Weekly Nur displayed that Res Assessment revea had open areas fro The assessment ic Resident #12. The Care Conferen AM labeled as Lat #12 explained tha the nurses did a p with her dressing they could do it m too. Resident #12	us revised 12/2/22 indicated that a potential skin impairment to her e to edema and weeping from Invention dated 4/17/22 directed Therapy (OT) and Nursing to treat rsing Assessment dated 12/1/22 sident #12 Shower Skin led alterations to her skin. The eg included a description that reral lower extremities skin issues the assessment identified the for Resident #12. rsing Assessment dated 12/8/22 sident #12 Shower Skin led alterations to her skin. She om cellulitis to both of her legs. lentified the areas as not new for the Note dated 12/14/22 at 6:58 e Entry indicated that Resident t her right leg wept a lot. She said retty good job being consistent changes, but she would like it if fore consistently on the weekends reported that her leg treatments e per day on the weekends if she				

Number 6103				-	ort date 12, 2023
Facility name Countryside Hea	alth Care Center		Survey date April 3, 202	es 3 - April 13, 1	2023
Facility address 6120 Morningsi					
City Sioux City		JB			
Rule or Code Section	Ν	lature of Violation	Class	Fine Amount	Correction Date
		nt #12 expressed that at one time ed really good and she would like t.			
	displayed that Rea Assessment revea had open areas fr The assessment in Resident #12. The do a wound follow Monday to see ho dressings done. T did not do it, they treatment is orde charted as being o	rsing Assessment dated 12/15/22 sident #12 Shower Skin aled alterations to her skin. She om cellulitis to both of her legs. dentified the areas as not new for e writer explained that she could w-up with Resident #12 every ow many times she got her hat was if one particular person or could take corrective action. The red three times a day and is completed.			
	displayed that Re Assessment revea had open areas fr Resident #12 also out with some op	rsing Assessment dated 12/22/22 sident #12 Shower Skin aled alterations to her skin. She om cellulitis to both of her legs. had a scattered skin rash spread en due to scratching. The ified the areas as not new for			
	the OT directed the Resident #12's rig and left lower ext	Orders dated 12/23/22 written by ne staff to continue to check ht lower extremity (RLE) each shift remity (LLE) daily. Lotion could be to help release dried skin. RLE			

Number 6103					Report May 12	
Facility name Countryside Heal	th Care Center		Survey date April 3, 202		l 13, 20	23
Facility address 6120 Morningsid	e Avenue					
City Sioux City		JB				
Rule or Code Section	N	lature of Violation	Class	Fine Amou	unt	Correction Date
	wet on the evening and change daily. pain in one leg, us leg that is not sord thigh, calf, and for compression all d The N Weekly Nun displayed that Res Assessment revea Resident #12's lef drainage, while he with an open area fluids. The assessm new for Resident The N Weekly Nun displayed that Res Assessment revea had open areas fr The assessment ic Resident #12. The N Weekly Nun displayed that Res Assessment revea had open areas fr The Assessment revea had open areas fr The Assessment revea had scattered open legs. The assessm	rsing Assessment dated 12/29/22 sident #12 Shower Skin led alterations to her skin. t lower leg had cellulitis with no er right lower leg had cellulitis a that drained greenish clear ment identified the areas as not				

Number 6103				-	oort date y 12, 2023
Facility name Countryside Hea	alth Care Center		Survey dat April 3, 202	es 23 - April 13	, 2023
Facility address 6120 Morningsid	de Avenue				
City Sioux City		JB			
Rule or Code Section	N	lature of Violation	Class	Fine Amount	Correction Date
	Treatment Medic (MAR).	ation Administration Record			
	displayed that Res Assessment revea had reddened ope serosanguineous green drainage, a lower extremity. I indentation noted and her foot. The	rsing Assessment dated 1/15/23 sident #12 Shower Skin aled alterations to her skin. She en moisture related wounds with (clear to pink drainage) yellow, and foul odor noted to the right Resident #12 had a deep d between her right inner ankle nurse notified Resident #12's PCP. dentified the areas as new for			
	indicated that Res scheduled with the Practitioner (ARN weeping, yellow/g and a foul odor co saw the OTR/L whe need an appointed suggested increases three times a day explained that sho physician. The nu signs and sympton	dated 1/16/23 at 1:19 PM sident #12 had an appointment he Advanced Registered Nurse P) on 1/18/23 due to increased green serosanguineous drainage, oming from her leg. Resident #12 no educated her that she did not hent to see a physician but sing treatment for edema wraps to . Afterwards, Resident #12 e did not want to go see a rse educated Resident #12 on the ms of infection. Resident #12 derstanding and explained that			

Number 6103				Report o May 12,		
Facility name Countryside Hea	lth Care Center		Survey da April 3, 2		pril 13, 2()23
Facility address 6120 Morningsid	e Avenue					
City Sioux City		JB				
Rule or Code Section	Ν	lature of Violation	Class	Fii Ar	ne nount	Correction Date
	would go to her a	rsing Assessment dated 1/19/23				
	Assessment revea had an open area	lisplayed that Resident #12 Shower Skin Assessment revealed alterations to her skin. She ad an open area to her lower leg from cellulitis. The assessment identified the areas as not new for tesident #12.				
	indicated that Res hallucinating to the morning but denies The nurse notified possible hallucina appointment due and edematous to #12 did have a tell for that coming M physician gave or	dated 1/20/23 at 11:45 AM sident #12 complained of ne bath aide and the CMA that ed the complaints to the nurse. d Resident #12's PCP of her tions and refusal to be seen at h to increased weeping, foul odor o her bilateral lower legs. Reside ehealth appointment scheduled londay (1/23/23) at 12:15 PM. T ders to send Resident #12 to the ased hallucinations or signs or sis.	, nt he			
	Resident #12 to the hallucinations inc	order dated 1/20/23 to send ne emergency room (ER) for luded an order dated 1/23/23 to ntibiotic) 300 milligrams one for ten days.	,			

Number 6103					Report May 12	
Facility name Countryside Hea	Ith Care Center		Survey date April 3, 202		l 13, 202	23
Facility address 6120 Morningsic	le Avenue					
City Sioux City		JB				
Rule or Code Section	N	lature of Violation	Class	Fine Amou	unt	Correction Date
	Lower Extremity (evenings and nigh were to check and abdominal (ABD) woven gauze) and garment on thigh, Extremity (LLE), th only using ABDs, k The Telehealth Ap included a new or one tablet twice of The Nurses Note of indicated the facil #12's PCP regardin PCP gave a new o cellulitis discharge The N Weekly Nur displayed that Res Assessment revea had left leg-celluli as Resident #12 re The right leg had	dated 1/24/23 at 4:03 PM ity received a fax from Resident ng drainage from her legs. The rder to get a wound culture from e. rsing Assessment dated 1/26/23 sident #12 Shower Skin iled alterations to her skin. She tis but the nurse could not assess efused to have her leg unwrapped. cellulitis with whitish-green The assessment identified the				

Number 6103				-	ort date y 12, 2023
Facility name Countryside Heal	th Care Center		Survey date April 3, 202		, 2023
Facility address 6120 Morningsid	e Avenue				
City Sioux City		JB			
Rule or Code Section	N	ature of Violation	Class	Fine Amount	Correction Date
	that Resident #12 ten days for cellul to weep heavily, s smelling odor not The Nurses Note of indicated that Res therapy for celluli (out of the ordina appeared beefy re but with no increa completed the tre #12 denied pain o The Orders - Adm 12:33 PM listed th leg pumps due to abscess, pain, and The Physician Con indicated that the on the wound cult lab reported Prote culture. The physi orders. The N Weekly Nur displayed that Res Assessment revea	dated 1/29/23 at 12:17 AM sident #12 remained on antibiotic tis to her right leg with no adverse ry) reactions noted. Her right leg ed with moderate weeping noted ase in warmth. The nurse eatment per her order. Resident r discomfort. inistration Note dated 1/30/23 at nat the nurse held Resident #12's pain from her lymphedema			

Number 6103					Report date May 12, 2023	
Facility name Countryside Healt	h Care Center		Survey date April 3, 202		13, 202	23
Facility address 6120 Morningside	Avenue					
City Sioux City		JB				
Rule or Code Section	Ν	lature of Violation	Class	Fine Amoun	nt	Correction Date
	drainage from it d assessment identi Resident #12. The Orders - Adm 11:27 AM indicate leg pumps to be u treatment due to abscess sac fell of The N Weekly Nur displayed that Res Assessment revea leg appeared swollen identified the area The form describe erythema on both issues for that shi The N Weekly Nur displayed that Res Assessment revea Resident #12 had upper legs. OT wo Wrapping and ede bilateral compress	rsing Assessment dated 2/9/23 sident #12 Shower Skin led alterations to her skin. Her left llen with erythema. The right leg with draining. The assessment as as not new for Resident #12. ed that besides swelling and h legs no observation of other skin ft's assessment. rsing Assessment dated 2/16/23 sident #12 Shower Skin led alterations to her skin. lymphedema to her lower and				

Number 6103]			Report May 12	
Facility name Countryside Hea	lth Care Center		Survey date April 3, 202		13, 202	23
Facility address 6120 Morningsio	de Avenue					
City Sioux City		JB				
Rule or Code Section	1	Nature of Violation	Class	Fine Amou	int	Correction Date
	the OTR/L instruct their orders do not they need to get a. Apply and use of b. Immediately and Compreflex must i. Green s ii. Red str iii. Yellow iv. Compre Please, Certified I Registered Nurse applied immediat the legs fill with f follow these order consistently. An a regardless of wha Record (MAR) sta on Resident #12 a OTR/L comes. Oth late in the day, ho the legs are full. The N Weekly Nu displayed that Re Assessment revea assessment ident	compression pumps daily. ter pumps are removed, go on over the edema wear. tripe - thigh				

Number 6103			Report da May 12, 2			
Facility name Countryside Hea	th Care Center		Survey dates April 3, 2023		13, 202	23
Facility address 6120 Morningsid	e Avenue					
City Sioux City		JB				
Rule or Code Section	N	lature of Violation	Class	Fine Amou	unt	Correction Date
	Administration Re documentation the (LPN), and CMAs of legs. The Nurses Note of resident #12's PCI complaints of righ Resident #12's PCI #12 to the ER of he Resident #12's PCI #12 to the ER of he Resident #12's far ER. The Orders - Adm 3:06 AM the over #12 died in the ho On 4/5/23 at 1:45 reported that Res areas to her legs we cart. Staff L addec involve changing to Resident #12's leg	bruary 2023 Treatment ecord (TAR) included hat RNs, Licensed Practical Nurses did her treatments to her lower dated 3/1/23 at 3:39 pm indicated P got notified that she had recent at flank pain with lower back pain. ine appeared amber (dark lor) with sediment (skin tissue). P gave an order to send Resident her choice. The nurse notified mily who would meet her at the inistration Note dated 3/10/22 at night nurse reported that Resident ospital on Wednesday, 3/8/23. 5 PM Staff L, CMA/Scheduler, ident #12 did not have any open when she worked the medication d that the only treatment she did the ABD pad when it got full from g weeping. She explained that she nd cleanser with the ABD pad				

Number 6103				oort date y 12, 2023	
Facility name Countryside Heal	th Care Center		Survey dates April 3, 2023 - April 13, 2023		, 2023
Facility address 6120 Morningsid	e Avenue				
City Sioux City		JB			
Rule or Code Section	N	lature of Violation	Class	Fine Amount	Correction Date
	that Resident #12 her right lower leg explained that he better job of takin that one weekend cared for Residen came in in the after reported that Res change that morn her room and asked dressing that morn she did not becau U reported that so her dressing chan On 4/6/23 at 1:35 prescribe antibiot #12's upper arm a the Infectious Disc cellulitis. In a follow-up inter L reported the dra drained fluid from the ABD ever had replied that it might that due to it bein remember becaus	PM, Staff U, CNA/CMA, stated had an open area to the back of g that looked like a blister. He thought staff could have done a og care of her wound. He reported I in early February another CMA t #12 during the day. When he ernoon, the previous CMA ident #12 refused her dressing ing. He explained that he went to ed her if anyone changed her ning. Resident #12 responded that se reported being too busy. Staff ometimes Resident #12 did refuse ges. PM the PCP's nurse the PCP did ics a couple of times for Resident and lower leg cellulitis, but she saw eases and Wound Center for her erview on 4/6/23 at 1:47 PM, Staff ainage color as clear and that its the edema. When questioned if yellow or green drainage, she sht have once or twice. Staff L ant have had a bad smell. She said ag a long time ago, she couldn't se she left doing the medication a scheduler instead.			

Number 6103			Report date May 12, 2023		
Facility name Countryside Health Care Center			Survey dates April 3, 2023	3, 2023	
Facility address 6120 Morningsid	de Avenue				
City Sioux City		JB			
Rule or Code Section	N	lature of Violation	Class	Fine Amount	Correction Date
	U, said her dressin green watery drai that it occurred m hospital. He adde but he did not kno or her feet since h described her ent color. On 4/10/23 at 9:4 that the OTL/R to lymphedema wra treatment Reside right leg wound to and wrap it with h #12's leg had mos smelled foul and h and/or green. She the OTL/R when s not need to see a her opinion, that Staff K said that th appointment inst- her on an antibio to the Director of should see a wou	erview on 4/6/23 at 2:50 PM Staff ng did have some yellow and inage off and on. Staff U explained hore so before she went to the d that her wound did smell bad, ow if the smell came from her leg ne was down by her foot. He tire right lower leg as a dark red in 40 AM Staff K, LPN, she explained ok care of Resident #12's ps. She explained that the only nt #12 had included orders for her o put an ABD on the weeping area cerlix. She explained that Resident stly clear drainage, but it still had drainage at times of yellow e reported being in the room with the told Resident #12 refused to go. hey made a telehealth ead for Resident #12 and started tic. She stated that she mentioned Nursing (DON) that Resident #12s nd specialist, but the DON told her have wound care there.			

Number 6103			Report date May 12, 2023		
Facility name Countryside Hea	Ith Care Center		Survey dates April 3, 2023 - April 13, 2023		2023
Facility address 6120 Morningsic	le Avenue				
City Sioux City		JB			
Rule or Code Section	N	lature of Violation	Class	Fine Amount	Correction Date
	treated residents both at home and Resident #12's leg profusely. She exp bad that she incre daily to each shift she felt that Resid care from the faci a conversation wi while she saw som staff only touched wrap and thought However, in realit explained that if F changed as ordere have them change facility had many changing the dress everyone thought them. When aske drainage, she stat and/or green, fou her legs. She did r infection, but felt that drained from On 4/13/23 at 1:1	15 PM the OTL/R stated that she with lymphedema for two years at the facility. She said that both is had severe edema and wept blained that the right leg wept so eased the dressing changes from and as needed. She reported that lent #12 received sketchy wound lity staff. She added that she had th the DON about it and for a ne improvement. She stated that it didn't need to be changed. If the outside of the normally dry that it didn't need to be changed. If the wrap hid a soaked ABD. She Resident #12's dressings got ed, she would not have needed to ed so often. She reported that the different staff responsible for sing. The OTL/R explained that that someone else should change d about the color and odor of ed that off and on she saw yellow I smelling drainage from both of not feel Resident #12's legs had an that she had an internal infection the lymph system out of her legs. 0 PM the DON denied knowing not do dressing changes. The DON rses documented that Resident because they could not diagnose.			

Number 6103			Report date May 12, 2023			
Facility name Countryside Health Care Center			Survey dates April 3, 2023 - April 13, 2023			23
Facility address 6120 Morningsid	e Avenue					
City Sioux City		JB				
Rule or Code Section	N	lature of Violation	Class	Fine Amou	unt	Correction Date
	identified a BIMS cognition. The ME hypertension (hig stroke, Parkinson' seizures and respi Resident #5 requi person with trans hygiene. The Care Plan Foc Resident #5 had a to immobility. The following: a. Initiated 10/1/2 b. Revised 5/16/2 cares On 4/3/23 at 10:5 flat red spots abov inner elbow area. had them for abov #5 expressed that away. She added in night but they sta	ADS assessment dated 3/30/23 score of 15, indicating intact DS included diagnoses of h blood pressure), pneumonia, 's disease, left lower leg fracture, iratory failure. The MDS listed that red limited assistance from one fers, dressing, and personal cus dated 12/15/22 indicated that risk for altered skin integrity due e Interventions directed the 20: Weekly skin assessments. 2: Daily skin observation with 45 AM observed a few scattered ve and below Resident #5's right Resident #5 reported that she ut two and a half weeks. Resident come of the areas were going that at first, they itch more at rted to itch some during the day stated the facility did not do ash.				

Number 6103				oort date y 12, 2023	
Facility name Countryside Hea	Ith Care Center		Survey dates April 3, 2023 - April 13, 2023		
Facility address 6120 Morningsic	de Avenue				
City Sioux City		JB			
Rule or Code Section	N	lature of Violation	Class	Fine Amount	Correction Date
	 3/7/22 listed that alterations in skin The N Weekly Nut 3/15/23 indicated below her breasts The N Weekly Nut 3/21/23 listed that small red rash to be legs. The week of 3/28 assessment. The N Weekly Nut 4/4/23 Resident # arms, abdomen, and description of new see the treatment Resident #5's Apr Record (TAR) listed complete weekly 	rsing Skin Assessment dated I that Resident #5 had redness S. rsing Skin Assessment dated at Resident #5 continued to have a both of her arms, abdomen, and /23 lacked a documented rsing Skin Assessment dated 45 continued to have a rash to her and legs. The comments related to w areas if applicable directed to t MAR for Resident #5's progress. il 2023 Treatment Administration ed an order dated 11/2/21 to skin checks every Tuesday night. hy additional orders related to the			
		ical record lacked documentation the physician related to her rash.			

Number 6103			Report date May 12, 202		
Facility name Countryside Hea	lth Care Center		Survey date April 3, 2023		2023
Facility address 6120 Morningsic	le Avenue				
City Sioux City		JB			
Rule or Code Section		lature of Violation	Class	Fine Amount	Correction Date
	Guidelines revised upon need and re will implement in care of skin issues On 4/13/23 at 1:1 explained that she	ry/Skin Breakdown-Clinical d May 2021, directed that based sults of the evaluations, the staff terventions for the prevention and s. 0 PM the Director of Nursing e was pretty sure that someone d Resident #5's rash.			

Number 6103					rt date 12, 2023
Facility name Countryside Hea	alth Care Center	-	Survey dates April 3, 2023 - April 13, 2023		
Facility address 6120 Morningsi					
City Sioux City		JB			
Rule or Code Section	Ν	lature of Violation	Class	Fine Amount	Correction Date
	FACILITY RESPON	SE			

Number 6103			Report date May 12, 2023		
Facility name Countryside Heal	th Care Center		Survey dates April 3, 2023 - April 13, 2023		
Facility address 6120 Morningsid	e Avenue				
City Sioux City		JB			
Rule or Code Section	N	lature of Violation	Class	Fine Amount	Correction Date
58.28(3)e	facility shall be reamaintenance of a and personnel. (II 58.28(3) Resident e. Each resident sl to protect against elements in the en DESCRIPTION Based on observat policy review the and failed to assu to prevent one from knowledge. This fa serious harm, seri death resulting in health, safety, and 2 residents review Resident #17 had self-transfer, wan of one person. On #17 not responsiv beside her bed. Th by ambulance. Th hospital that she p	-		\$10,000.00 Held in Suspension	Upon Receipt

Number 6103				ort date 12, 2023		
Facility name Countryside Heal	Ith Care Center		Survey dates April 3, 2023 - April 13, 2023		2023	
Facility address 6120 Morningsid	e Avenue					
City Sioux City		JB				
Rule or Code Section	N	lature of Violation	Class	Fine Amount	Correction Date	
		/5/23. Resident #4 received a lead and required four staples.				
	Immediate Jeopar at 11:30 AM. The Immediate Jeopar following actions: a. On 4/4/23 at 12 the Maintenance Technician. Additi current employee the process of the alarms are shut of communication w b. On 4/4/2023 at departments rece communication, p alarms to be shut procedure prior to The facility planne c. On 4/4/23 at 9: walk-through of th functioning alarm doorways. d. On 4/4/2023 at resident headcour back on. e. On 4/4/23 at 1: Medical Director a	informed the facility of the rdy (IJ) that began on April 4, 2023 Facility Staff removed the rdy on April 5, 2023 through the 2:45 PM one on one training with Director and Maintenance onal education provided to the s regarding communication and e door watch when the door ff for repair and who needs with the plan to provide on-going . : 12:45 PM the staff in all vived reeducation on properly preparing for the door off, the Door Alarm policy and o returning to work assignment. ed to provide ongoing training. 30 AM the facility completed a he building to ensure properly s and no obstruction of the s 9:00 AM the facility completed a ant after turning the door alarms 30 PM the facility notified the and reviewed it through the e Program Improvement (QAPI).				

Number 6103			Report date May 12, 2023			
Facility name Countryside Heal	th Care Center		Survey dates April 3, 2023 - April 13, 2023		23	
Facility address 6120 Morningsid	e Avenue					
City Sioux City		JB				
Rule or Code Section	N	lature of Violation	Class	Fine Amo	unt	Correction Date
	communication, p shutting off the do the procedure. The going training. G. The Administra facility and inspect Friday five times a a week for two we thereafter. h. The facility wou monthly QAPI me i. Management wi shut off and mana continuously mon up. j. The Administrat weekends and off nurse/supervisor k. Management wi is parked in doorw The scope lowere the survey after e education and the	will monitor the doors. vill walk rounds to ensure nothing				

Number 6103			Report date May 12, 2023			
Facility name Countryside Heal	th Care Center		Survey dates April 3, 2023 - April 13, 2023		23	
Facility address 6120 Morningsid	e Avenue					
City Sioux City		JB				
Rule or Code Section	N	lature of Violation	Class	Fine Amou	nt	Correction Date
	facility without en- alarm observed ne Director of Nursin revealed the door that someone cou facility that easily. On 4/4/23 at 7:30 without entering a observed no alarm On 4/4/23 at 7:41 doors opened, du without entering a sounded, and no s On 4/4/23 at 7:43 hallway a table an Able to walk arou building without e alarm sounded, an On 4/4/23 at 7:46 hallway doors ope the code to disabl Remained in the 3 minutes total time On 4/4/23 at 8:01	 2:47 PM during entrance to the atering a code to disable the door of door alarm sounding. The g (DON) came to the door and is are being worked on. She added ald not normally get into the door and the atering entry into the building a code to disable the alarm, in sounding, or staff at the time. AM observed the 100 hallway ring the exit into 800 wing the alarm disable code, no alarm staff observed at the time. AM witnessed at the end of 200 and chair blocked the exit door. Ind the table and chair and exit the entering the alarm disable code no and no staff observed at the time. AM observed the end of the 300 en, able to exit without entering the alarm sounded. 800 hallway for approximately 15 e and no staff were observed. AM witnessed the front door m sounding or staff. 				

e Center			Report date May 12, 2023		
		Survey dates April 3, 2023 - April 13, 2023			
nue					
	JB				
Ν	lature of Violation	Class	Fine Amount	Correction Date	
e administrat ding or staff /4/23 at 8:20 , exit the 100 alarm disable plained that t /4/23 at 9:17 ty with Staff alarms, Staff che door bloc ent residents aled the door facility is wait at them. Why with an alar staff E addec n switch to tui ty. He explain the doors tur ced on the flo facility turned ntenance staff ing staff are t	tive hallway opened with no alarm observed. AM watched Staff B, Dietary hallway doors without entering code or no alarms sounded. Staff he codes are off on the doors. AM during a walkthrough of the E, Maintenance staff, to check the E explained that the 200 hallway ked with a table and chair to from exiting the facility. Staff E rs haven't worked for a while and ing on a company to come out and en tested, the door opened right m sounding. During testing of the anding mechanical lift blocked the d that the facility only had one rn off the door alarms in the ned that that morning the facility ned off as the maintenance staff fors. Staff E continued that when off the door alarms, the f notified nursing staff. The o check the doors and residents				
nn as an airteachtair	4/4/23 at 8:03 be administrated anding or staff 4/4/23 at 8:20 e, exit the 100 alarm disable plained that t 4/4/23 at 9:17 ity with Staff r alarms, Staff the door bloc yent residents ealed the door facility is wait at them. Whe y with an alar r alarms, a sta Staff E addec n switch to tu ity. He explain the doors turk ked on the flo facility turned ntenance staff sing staff are to y 15 minutes supposed to b	JB Nature of Violation A/4/23 at 8:03 AM observed the door at the end he administrative hallway opened with no alarm nding or staff observed. A/4/23 at 8:20 AM watched Staff B, Dietary e, exit the 100 hallway doors without entering alarm disable code or no alarms sounded. Staff plained that the codes are off on the doors. A/4/23 at 9:17 AM during a walkthrough of the ity with Staff E, Maintenance staff, to check the r alarms, Staff E explained that the 200 hallway the door blocked with a table and chair to vent residents from exiting the facility. Staff E ealed the doors haven't worked for a while and facility is waiting on a company to come out and at them. When tested, the door opened right y with an alarm sounding. During testing of the r alarms, a standing mechanical lift blocked the Staff E added that the facility only had one in switch to turn off the door alarms in the ity. He explained that that morning the facility the doors turned off as the maintenance staff ked on the floors. Staff E continued that when facility turned off the door alarms, the intenance staff notified nursing staff. The sing staff are to check the doors and residents ry 15 minutes to make sure they are where they supposed to be. Staff E continued to report that maintenance staff notified the staff that they	Nature of Violation Class A/4/23 at 8:03 AM observed the door at the end e administrative hallway opened with no alarm nding or staff observed. A/4/23 at 8:20 AM watched Staff B, Dietary a, exit the 100 hallway doors without entering alarm disable code or no alarms sounded. Staff plained that the codes are off on the doors. A/4/23 at 9:17 AM during a walkthrough of the ity with Staff E, Maintenance staff, to check the r alarms, Staff E explained that the 200 hallway the door blocked with a table and chair to yent residents from exiting the facility. Staff E saled the doors haven't worked for a while and facility is waiting on a company to come out and at them. When tested, the door opened right y with an alarm sounding. During testing of the r alarms, a standing mechanical lift blocked the Staff E added that the facility only had one n switch to turn off the door alarms in the ity. He explained that that morning the facility the doors turned off as the maintenance staff ked on the floors. Staff E continued that when facility turned off the door alarms, the netance staff notified nursing staff. The sing staff are to check the doors and residents y 15 minutes to make sure they are where they	Nature of ViolationClassFine Amount1/4/23 at 8:03 AM observed the door at the end he administrative hallway opened with no alarm nding or staff observed.A/4/23 at 8:03 AM observed the door at the end he administrative hallway opened with no alarm nding or staff observed.A/4/23 at 8:20 AM watched Staff B, Dietary e, exit the 100 hallway doors without entering alarm disable code or no alarms sounded. Staff plained that the codes are off on the doors.A/4/23 at 9:17 AM during a walkthrough of the ity with Staff E, Maintenance staff, to check the r alarms, Staff E explained that the 200 hallway the door blocked with a table and chair to vent residents from exiting the facility. Staff E taled the doors haven't worked for a while and facility is waiting on a company to come out and cat them. When tested, the door opened right y with an alarm sounding. During testing of the r alarms, a standing mechanical lift blocked the Staff E added that the facility only had one n switch to turn off the door alarms in the ity. He explained that that morning the facility the doors turned off as the maintenance staff ked on the floors. Staff E continued that when facility turned off the door alarms, the ntenance staff notified nursing staff. The sing staff are to check the doors and residents y 15 minutes to make sure they are where they supposed to be. Staff E continued to report that	

Number 6103				-	ort date y 12, 2023
Facility name Countryside Hea	alth Care Center		Survey date April 3, 202		2023
Facility address 6120 Morningsi					
City Sioux City		JB			
Rule or Code Section		lature of Violation	Class	Fine Amount	Correction Date
	planned to turn o turning them off.	ff the door alarms prior to him			
	facility could not that the facility tr messed up the en On 4/4/23 at 10:3 (RN), reported the turns off the door staff. At that time with the residents	36 AM Staff F, Registered Nurse at when the maintenance staff alarms they will come and tell the the staff is to be on high alert			
	Medication Aide maintenance staf tell the staff and t	(CMA), revealed when the f turns off the door alarms they then they have someone watching here is a resident is at risk for			
	areas: door check week. Staff E reve monthly but the f	umentation related to Hazardous is listed the doors passed each ealed they used to check them facility now checks them on a nsure they are in working order.			
	Logs policy dated should make rout	Alarm Checks, Use of Door Alarm April 2023 revealed that the staff ine door alarm checks to help safety and well-being.			

Number 6103					eport o lay 12,	
Facility name Countryside Hea	lth Care Center		Survey date April 3, 202		13, 202	3
Facility address 6120 Morningsid	e Avenue					
City Sioux City		JB				
Rule or Code Section	Ν	lature of Violation	Class	Fine Amoun	nt	Correction Date
	that she expected when they got tur 2. Resident #17's 1/3/23 identified (BIMS) score of 4, cognition. The MI required extensiv bed mobility, tran Resident #17's Ac dated 12/22/22 s revealed: 1. Resident #17 fe had two other fal 2. Resident #17 fa had two other fal 2. Resident #17's a. UTI (urinary tra b. Dementia c. Possible NSTEN Resident #17's Cli assessment. The Care Plan Foo Resident #17 as a directed the folloo	Minimum Data Set (MDS) dated a Brief Interview of Mental Status indicating severely impaired DS indicated that Resident #17 e assistance from two staff with hisfers, and toilet use. Imission History and Physical igned by a Physician's Assistant ell at her home on 12/20/22 and ls in the prior four days. diagnoses included the following: act infection) All (a type of heart attack) nical Record lacked a fall risk cus dated 1/3/23 identified risk for falls. The Interventions				

Number 6103				-	ort date y 12, 2023
Facility name Countryside Hea	Ith Care Center		Survey date April 3, 2023		, 2023
Facility address 6120 Morningsid	e Avenue				
City Sioux City		JB			
Rule or Code Section	N	lature of Violation	Class	Fine Amount	Correction Date
	requests for assist b. Ensure a safe e adequate lighting c. Ensure proper f d. Follow the facil e. Resident #17 nd (SPECIFY: even flo adequate, glare-fr call light, the bed as ordered, handr within reach). (un f. Initiate neurolog for any or suspect g. Notify the phys as needed. h. Physical Therap (OT) to evaluate a The Nurses Note of that Resident #17 night, including se into the hallway w appeared confuse was. She asked th She was transferre tried to self-transf transferred her in wanted to go back	nvironment free of clutter and has . Clean up spills promptly. footwear when out of bed. ity's fall protocol. eeds a safe environment with: free from spills and/or clutter; ree light; a working and reachable in low position at night; Side rails rails on walls, personal items finished intervention). gical checks per facility protocol			

Number 6103					Report May 12	
Facility name Countryside Hea	alth Care Center		Survey date April 3, 202		13, 20	23
Facility address 6120 Morningsi	de Avenue					
City Sioux City		JB				
Rule or Code Section	Ν	Jature of Violation	Class	Fine Amou	ınt	Correction Date
		Resident #17 did not have a fever ontinue monitoring her.				
	listed that Resider yelling at staff, wa medications. The care. The Daily Skilled C AM listed that Re yelling at staff, wa medications. The care. The Daily Skilled C PM listed that Res	Charting dated 1/15/23 at 9:02 AM nt #17 exhibited behaviors of andering, and spitting out her symptoms interfered with her Charting dated 1/16/23 at 10:42 sident #17 exhibited behaviors of andering, and spitting out her symptoms interfered with her Charting dated 1/17/23 at 12:28 sident #17 exhibited behaviors of andering, and spitting out her				
	medications. The care.	on 1/20/23 at 10:31 AM identified				
	as Physical Therap bruise appeared of and measured 8 of note indicated the transfer herself w staff assist Reside walker. The nurse	by noted a bruise to her head. The dark purple to light blue in color centimeters (cm) by (x) 6 cm. The at Resident #17 did attempt to when left in her room alone. The ent #17 with one person and a e notified the staff that Resident ine in the community living room				

Number 6103				-	ort date / 12, 2023
Facility name Countryside Health Care Center			Survey date April 3, 202	2023	
Facility address 6120 Morningsi	de Avenue				
City Sioux City		JB			
Rule or Code Section	Ν	lature of Violation	Class	Fine Amount	Correction Date
	not have the recli Resident #17 atter try to self-transfe The Care Plan lack Resident #17 brui transfer, her wand staff assistance ne unattended she tr should have her in living room to allo The Nurse's Note that the Certified nurse to Resident (due to) her not re #17's room discov beside her bed or turned to the righ Nurse (RN) rolled Resident #17 app her lips and nail b could not get a bl	tion for closer monitoring and to ner remote within her reach. mpts to move the recliner up to r. ked information related to se her head, her attempts to self- dering, aggression, the amount of eeded to transfer, if left ries to get up alone, and that staff in the recliner in the community ow for monitoring. on 1/25/23 at 6:20 AM revealed Medication Aide (CMA) called a #17's room at 5:18 AM due to esponding. Upon entry to Resident vered her lying on a mattress in her stomach with her head t side. The CMA and Registered Resident #17 onto her left side. eared pale, cold to the touch with eds cyanotic (blue). The nurse ood pressure (BP), an oxygen t), or a pulse. Resident #17 did			
	breathing. The nu it did not have an did not see anyth that Resident #17	 rate of 6 with very shallow rse assessed her airway to ensure y blocking it, in which the nurse ing visible. The nurse confirmed had a do not resuscitate (DNR) CMA called 911 at 5:22 AM while 			

Number 6103					Report May 12	
Facility name Countryside Hea	lth Care Center		Survey date April 3, 2023		13, 202	23
Facility address 6120 Morningsic	le Avenue					
City Sioux City		JB				
Rule or Code Section	N	lature of Violation	Class	Fine Amour	nt	Correction Date
	face mask. The CM Director of Nursin answer. The nurse attempts to obtai and arouse Reside her left side until Technicians (EMT she passed Reside medications abou Resident #17 app pills without incid resident their pills out so she went to entered Resident the mattress beside h the mattress and turned Resident # her not respondin the situation. The out of facility (OO room (ER). The nu emergency contac Resident #17 beca her to the ER. The AM and again at 6 from the ER nurse passed away on h	ygen (O2) at 8 L (Liters) via a full- MA attempted to contact the g (DON) at 5:30 AM with no e made several unsuccessful n a complete set of vital signs (VS) ent #17. Resident #17 remained on the Emergency Medical s) arrived. The CMA reported that ent #17's early morning (AM) t 10 minutes prior. At that time eared awake, alert, and took her ent. While the CMA gave another s, the CMA heard the resident call o check Resident #17. When she #17's room she found her on the er bed with her stomach down on she had head facing left. The CMA f17's head to the right and found bg so she called the RN to assess EMTs transported Resident #17 F) at 5:42 AM to the emergency trse called Resident #17's ct at 5:45 AM and reported that ame unresponsive, so they sent e nurse paged the physician at 5:47 5:09 AM. The facility received a call e at 6:11 AM that Resident #17 er way to the ER. The nurse sent a called the DON to notify her.				

Number 6103					eport date ay 12, 2023
Facility name Countryside Health Care Center			Survey date April 3, 202	3, 2023	
Facility address 6120 Morningside	e Avenue				
City Sioux City		JB			
Rule or Code Section		lature of Violation	Class	Fine Amount	Correction t Date
	she died 1/25/23 listed as atherosol the manner of dea The Falls and Fall April 2023 instruc a. Based on previo the staff will ident resident's specific the resident from complications from b. The interdiscipl appropriate interv On 4/13/23 at 1:2 Resident #17 had interventions to p 3. Resident #4's N assessment dated Interview for Mer indicating modera included diagnose pneumonia, non-/ failure, and osteo. Resident #4 requi person with trans	Risk, Managing policy reviewed ted the following: ous evaluations and current data, tify interventions related to the risks and causes to try to prevent falling and try to minimize m falling. inary team will attempt to identify ventions to reduce the risk of falls. 8 PM, the DON reported that adequate supervision and			

Number 6103					Report May 12	
Facility name Countryside Hea	Ith Care Center		Survey date April 3, 202		l 13, 20	23
Facility address 6120 Morningsid	de Avenue					
City Sioux City		JB				
Rule or Code Section	1	Nature of Violation	Class	Fine Amou	unt	Correction Date
	Resident #4 had a medical condition not comply with a 11/27/22, Reside Interventions dire a. 7/1/21 - Ensure #4's room. b. 7/1/21 - Assess when declines in c. 10/8/21 - Whee wheelchair to rep d. 11/2/21 - Whee wheelchair to rep d. 11/2/21 - Activ Resident #4 need toilet use. e. 11/2/21 - Antio f. 11/2/21 - Ensur #4's personal spa g. 11/2/21 - Keep h. 11/2/21 - Keep h. 11/2/21 - Make personal items th his reach and at h i. f. 11/2/21 - Che needs. j. 11/23/21 - Plac k. 11/23/21 - Enc appropriate footw	e adequate lighting in Resident ce. my urinal within my reach. e sure that all of Resident #4's at he could want to use are within				

Number 6103				-	oort date y 12, 2023
Facility name Countryside Hea	lth Care Center		Survey date April 3, 202	, 2023	
Facility address 6120 Morningsio	de Avenue				
City Sioux City		JB			
Rule or Code Section		lature of Violation	Class	Fine Amount	Correction Date
	due to increased on. 12/22/21 - PT/0 recommendations o. 1/11/22 - Offer restroom frequen attempts at self-ti p. 1/21/22 - Bolst bed for border ide due to fall on 1/22 q. 1/21/22 - Remi for help when I ne due to fall on 1/22 r. 2/4/22 - Staff an staff between 7:3 2/4/22. s. 2/10/22 - Anti-Fi on 2/9/22. t. 2/10/22 - Take someone is not pur risk related to his refused this interv u. 2/10/22 - Trans room to help assis transfer due to fa v. 3/1/22 - Anti-Ti due to fall on 3/10 w. 3/11/22 - The of assigned to Reside the dining room a	OT to evaluate and treat per s. and assist Resident #4 to the tly to minimize resident's ransferring 1/11/22. ers to be placed along the edge of entification as Resident #4 allowed 1/22. nd me to use my call light and ask eed to use the toilet, or transfer 1/22. re to assist Resident #4 to bed by 0 PM and 9:00 PM due to fall on Roll backs placed on his wheelchair pedals off the wheelchair when ushing Resident #4 to minimize fall falls on 2/3/22. Resident #4 vention. offer Pole placed in Resident #4's st him if he attempts to self- ll on 2/9/22. ppers placed on his wheelchair			

Number 6103				-	oort date y 12, 2023
Facility name Countryside Hea	Ith Care Center		Survey dates April 3, 2023 - April 13, 2023		, 2023
Facility address 6120 Morningsid	le Avenue				
City Sioux City		JB			
Rule or Code Section		lature of Violation ned floor mat to be placed next to	Class	Fine Amount	Correction Date
	room but will alar he may be attemp y. 4/5/22 - The nu provider (PCP) to (antidepressant). z. 5/17/22 - Reside activities three to provided to the Ad document any kin 5/15/22. aa. 6/11/22 - Staff #4 to the restroor (PRN) due to fall of The Care Plan lack falls after 6/11/22 The Orders - Adm at 1:51 AM director function of Reside The note indicated fall alarm availabl The Nurses Note of indicated the facil Resident #4's PCP	eed any interventions related to 2. inistration Note dated 11/27/22 ed to check placement and ent #4's floor alarm every shift. d that Resident #4 did not have a e. dated 11/28/22 at 6:16 PM ity received a returned fax from regarding a fall on 11/27/22 and he seemed abnormal and monitor			

Number 6103				-	ort date 12, 2023
Facility name Countryside Health Care Center			Survey date April 3, 202		2023
Facility address 6120 Morningsi					
City Sioux City		JB			
Rule or Code Section	١	Nature of Violation	Class	Fine Amount	Correction Date
	Resident #4's clin of a fall on 11/27,	ical record lacked documentation /22.			
	placement and fu every shift. The n not have a fall ala 11/28/22 through the DON knew th 12/11/22, 12/16/ 12/24/22, 12/31/ Resident #4's Clin interventions put being available on The Nurses Note that staff heard a help Resident #4 Resident #4 on th on his back with b	ical Record lacked additional into place due to the alarm not			
	(Abd), and wrapp An assessment re temperature 98.1 pressure (bp) 115 94% on room air and neurological #4 stated to get h reported being of	ed it around Resident #4's head. vealed Resident #4's vital signs as ., pulse 85, respirations 22, blood /66, oxygen saturation (O2 sat) (RA). Resident #4 denied any pain (neuro) checks started. Resident im off the floor. Resident #4 kay and that he did not need to go e explained that he wanted to get			

Number 6103					port date ay 12, 2023	
Facility name Countryside Heal	th Care Center		Survey date April 3, 202		3, 2023	
Facility address 6120 Morningsid	e Avenue					
City Sioux City		JB				
Rule or Code Section		ature of Violation	Class	Fine Amount	Correction Date	
	Resident #4 down requested to send nurse called an an send Resident #4 notified the Direct Resident #4 lacked fall in the Risk Ma record (EHR). The Emergency/Tr 1/5/23 signed by a an acute head injut that resulted in a report indicated t that should be ren The Falls and Fall April 2023 instruct a. Based on previou the staff will ident resident's specific the resident from complications from b. The interdiscipl appropriate intervor c. If falling recurs will implement ad	bus evaluations and current data, tify interventions related to the risks and causes to try to prevent falling and try to minimize				
Number 6103			Report date May 12, 2023			
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Facility name Countryside Heal	th Care Center		Survey dates April 3, 2023 - April 13, 2023		23	
Facility address 6120 Morningsid	e Avenue					
City Sioux City		JB				
Rule or Code Section	N	ature of Violation	Class	Fine Amou	unt	Correction Date
	Resident #4 had a					

Number 6103				date 2, 2023	
Facility name Countryside Heal	th Care Center		Survey dates April 3, 2023 - April 13, 2023		
Facility address 6120 Morningsid	e Avenue				
City Sioux City		JB			
Rule or Code Section	N	lature of Violation	Class	Fine Amount	Correction Date
58.19(2)b	residents. The resises shall provide, as a nursing services u qualified nurses with these rules: 58.19(2) Medicatif b. Provision of the of wounds, includ healing, prevent in from developing; DESCRIPTION Based on observation policy review, staffacility failed to contain the order of the orde	tion, clinical record review, facility f, and resident interviews, the omplete weekly skin assessments assessments for 2 of 4 residents its #21 and #22) with pressure , the facility failed to initiate and ws for 1 of 4 residents reviewed th a pressure ulcer, resulting in a ssure ulcer. The facility reported a ents. a Set (MDS) assessment identifies ressure ulcers:		\$ 8000.00 Held in Suspension	Upon Receipt

Number 6103			Report date May 12, 202			
Facility name Countryside Healt	h Care Center		Survey dates April 3, 2023 - April 13, 2023		23	
Facility address 6120 Morningside	e Avenue					
City Sioux City		JB				
Rule or Code Section	N	ature of Violation	Class	Fine Amou	unt	Correction Date
	localized area of d filled blister due to from pressure and preceded by tissue boggy, warmer or tissue. Stage I intact skin localized area usu Darkly pigmented blanching; its colo area. Stage II partial thic as a shallow open without slough. M open/ruptured set Stage III full thickr may be visible but exposed. Slough n obscure the depth undermining and the Stage IV is full thick bone, tendon or m present on some p include undermining	ness tissue loss. Subcutaneous fat to bone, tendon or muscle are not hay be present but does not of tissue loss. May include tunneling. Extness tissue loss with exposed huscle. Slough or eschar may be parts of the wound bed. Often				

Number 6103]	Report May 12			
Facility name Countryside Hea	alth Care Center		Survey dates April 3, 2023 - April 13, 2023			23
Facility address 6120 Morningsi						
City Sioux City		JB				
Rule or Code Section	1	Nature of Violation	Class	Fine Amoun	nt	Correction Date
	assessment dated Interview for Men indicating moder MDS indicated sh from one person personal hygiene persons for trans indicated that she pressure ulcers/in unhealed pressur Resident #21 rece reducing devices turning/repositio ulcer/injury care, ointment/medica MDS included dia intracerebral hen hypertension (hig mellitus, malnutr obstructive hydro	Minimum Data Set (MDS) d 3/28/23 identified a Brief ntal Status (BIMS) score of 8, ate cognitive impairment. The required extensive assistance for bed mobility, toilet use, , and extensive assistance of two fers and dressing. The MDS e had a risk for developing njuries and had one stage one re ulcer/injury. The MDS listed that eived treatments included pressure on her chair and bed, ning program, pressure and applications of tions other than to her feet. The agnoses of nontraumatic norrhage (brain bleed), gh blood pressure), diabetes ition (lacking minerals or vitamins), ocephalus (fluid in the brain), sease and atrial fibrillation (the of normal causing an irregular				
	The Care Plan Foo Resident #21 had	cus dated 3/24/23 indicated actual impairment to her skin ile skin resulting in a coccyx				

Number 6103					oort date y 12, 2023
Facility name Countryside He	alth Care Center		Survey date April 3, 202		s, 2023
Facility address 6120 Morningsi					
City Sioux City		JB			
Rule or Code Section		lature of Violation	Class	Fine Amount	Correction Date
		ventions directed the staff to iment the location, size, and skin injury.			
	(TAR) contained t -Weekly skin asse Thursday with a s discontinue date documented on 3	Freatment Administration Record he following order: ssment one time a day every tart date of 3/23/23 and of 3/30/23. The order got /23/23 as being completed, but ation to indicate completion on			
		R contained the following order: ssment one time a day every te of 4/3/23			
	PM identified tha from the hospital warm, dry, and in	sessment dated 3/23/23 at 2:34 t Resident #21 came to the facility . Resident #21's skin appeared tact. The assessment revealed no ssues at the time of the			
	The facility failed 3/23/23 and 3/30	to complete a skin assessment on /30 as ordered.			
	spreadsheet date Resident #21 had	onal weekly wound assessment d 3/27/23 - 4/2/23 listed that a stage III wound to her coccyx 2 cm x 1 cm. The wound appeared			

Number 6103					leport Aay 12	
Facility name Countryside Heal	th Care Center		Survey dates April 3, 2023 - April 13, 2023			23
Facility address 6120 Morningsid	e Avenue					
City Sioux City		JB				
Rule or Code Section	Ν	Jature of Violation	Class	Fine Amour	nt	Correction Date
	open, with a pink (softened skin by	wound base and macerated moisture) edges.				
	skin assessment s facility provided t - The N Weekly N 4/3/23 indicated in her skin integri her coccyx that m The assessment la appearance of the - The N Weekly N 4/10/23 indicated in her skin integri measured 0.1 cm indicated they wo treatment of Triat three times a day and a description The ADON's perso spreadsheet date Resident #21 had that measured 0.1 appeared open, w macerated (soften A weekly nursing 4/10/23 related to	/11/23 to provide Resident #21's ince her admission of $3/23/23$, the he following assessments: ursing Skin Assessment dated that Resident #21 had alterations ty. She had a pressure wound to heasured 0.1 cm x 0.1 cm x 0.1 cm. acked a description of the e wound. ursing Skin Assessment dated d that Resident #21 had alterations ty. She had a pressure ulcer that x 0.1 cm x 0.1 cm. The note buld continue her current d (specialized wound ointment) . The assessment lacked a location of the appearance of the wound. on al weekly wound assessment d $4/3/23-4/9/23$ listed that a stage III wound to her coccyx 5 cm x 1.2 cm x 0.1 cm. The wound with a pink wound base and ned skin by moisture) edges. skin assessment completed on o the $3/23/23$ admission 1 cm x 0.1 cm pressure ulcer. The				

Number 6103			Report date May 12, 202		
Facility name Countryside He	alth Care Center		Survey date April 3, 202		2023
Facility address 6120 Morningsi					
City Sioux City		JB			
Rule or Code Section	Ν	lature of Violation	Class	Fine Amount	Correction Date
		measure 0.1 cm x 0.1 cm on the completed on 4/3/23 and			
		nical record lacked the weekly nts provided by the ADON.			
	identified a BIMS cognitive impairm required limited a mobility, transfer personal hygiene. stage 1 pressure of device in his chair interventions to n ulcer/injury care, ointment/medica MDS included dia diabetes mellitus, vitamins), depress imbalance), respin	MDS assessment dated 3/20/23 score of 14, indicating no nent. The MDS indicated he assistance of one person for bed s, dressing, toilet use, and The MDS listed that he had one alcer and used a pressure reducing r and bed, nutrition or hydration nanage skin problems, pressure and applications of tions other than to his feet. The gnoses of pneumonia, anemia, malnutrition (lack of minerals and sion, bipolar disorder (mood ratory failure, hemothorax (blood b, pleural effusion (fluid around the b) dependence.			
	regarding dischar an order for Resic Mepilex border d	charge Summary dated 2/22/23 ge equipment and supplies listed lent #22's left heel to apply a small ressing to the bulla on his left heel rposes, offload with a pillow, and ee days.			

Number 6103			Report date May 12, 202		•
Facility name Countryside Hea	Ith Care Center		Survey date April 3, 202		3, 2023
Facility address 6120 Morningsic	le Avenue				
City Sioux City		JB			
Rule or Code Section	N	lature of Violation	Class	Fine Amount	Correction t Date
	spreadsheet dated Resident #22 had measured 3 cm x listed the wound a tissue) tissue. In a a stage I wound to x 1 cm, the descrip appeared red and The Communication 2/27/23 at 2:00 Pl filled blister to Re measured 2.5 cm they cleaned the a dressing. The noted orders. The physic back to the facility noted the order of The Communication 2/28/23 identified blister to his left h for Prevalon boots bed, offload heels until healed? The	on provided to the Physician on M notified the Physician of a fluid sident #22's left heel that x 2.7 cm. The nurse indicated that area and covered it with an island e included a request for any new cian replied on 3/19/23 and sent y on 3/20/23. The facility's staff			

Number 6103			Report dat May 12, 20		port date ay 12, 2023
Facility name Countryside Hea	lth Care Center	-	Survey dates April 3, 2023 - April 13,		3, 2023
Facility address 6120 Morningsid	e Avenue				
City Sioux City		JB			
Rule or Code Section	٩	lature of Violation	Class	Fine Amount	Correction Date
	treatment of her with a white wou and measured 0.5 Resident #22's Fe following orders: - Apply a small Me (large blister cont protective purpos change every 3 da - Cleanse coccyx u Santyl (special wo Allevyn sacrum de day with a start d - Weekly skin asse start date of 2/22 The ADON's perso spreadsheet date Resident #22 had measured 3 cm x listed the wound tissue) tissue. In a a stage I wound to x 1 cm, the descri appeared red and The N Weekly Nu	essment every Wednesday with a /23 and discontinued on 3/5/23. onal weekly wound assessment d 2/27/23 - 3/5/23 listed that stage III wound to his coccyx that 2.9 cm x 0.3 cm. The description as open with slough (stringy dying addition, the spreadsheet included o his left heel that measured 1 cm ption indicated the wound			

Number 6103]	Report da May 12, 2			
Facility name Countryside Hea	alth Care Center		Survey date April 3, 202		13, 202	23
Facility address 6120 Morningsi						
City Sioux City		JB				
Rule or Code Section	٦	Nature of Violation	Class	Fine Amou	unt	Correction Date
	alteration in his s left heel with pee	kin integrity due to a blister to his Iing skin.				
	on 3/8/23 listed a	aden Risk Assessment completed a score of 18, indicating a risk for ure ulcers/injuries.				
	of Resident #22's lacked intervention	ised 3/8/23 lacked documentation pressure ulcer(s). The Care Plan ons for staff to implement and ng for Resident #22's pressure				
	3/11/23 indicated alteration in his s	rsing Skin Assessment dated d that Resident #22 had an kin integrity of a coccyx ulcer with essing and a left heel blister with				
	spreadsheet date Resident #22 had measured 3 cm x listed the wound tissue) tissue. In a a stage I wound t	onal weekly wound assessment d 3/6/23 - 3/12/23 listed that stage III wound to his coccyx that 2.9 cm x 0.3 cm. The description as open with slough (stringy dying addition, the spreadsheet included o his left heel that measured 1 cm ption indicated the wound d still intact.				
		nmary dated 3/11/23-3/15/23 following dressing and wound				

Number 6103			Report date May 12, 2023			
Facility name Countryside Hea	Ith Care Center		Survey dates April 3, 2023 - April 13, 2023		23	
Facility address 6120 Morningsic	le Avenue					
City Sioux City		JB				
Rule or Code Section	N	lature of Violation	Class	Fine Amo	unt	Correction Date
	needed. Apply pro- clean, dry, intact s three days and as and reattach the o facility policy for s Resident #22's Bra on 3/15/23 listed developing pressu The N Weekly Nur 3/25/23 indicated in skin integrity bu Resident #22's Ma contained the foll - Apply a small Me on the left heel fo with a pillow, cha of 2/23/23 - Cleanse coccyx u Santyl, then apply change once daily - Triad Hydrophilie with dressing cha	aden Risk Assessment completed a score of 17, indicating a risk for ure ulcers/injuries. rsing Skin Assessment dated I that Resident #22 had alterations ut no new areas. arch 2023 and April 2023 TAR owing orders: epilex border dressing to the bulla or protective purposes, off load nge every 3 days with a start date ulcer with normal saline, apply an Allevyn sacral dressing, with a start date of 2/23/23. c Wound paste to coccyx daily nges with a start date of 3/16/23. essments every Saturday with a				

Number 6103			Report da May 12, 2		
Facility name Countryside Heal	th Care Center		Survey date April 3, 2023		2023
Facility address 6120 Morningsid	e Avenue				
City Sioux City		JB			
Rule or Code Section	N	lature of Violation	Class	Fine Amount	Correction Date
	alteration in his sk to his coccyx that nurse applied curr the area. The ADON's perso spreadsheet dated Resident #22 had measured 1 cm x f wound as open w tissue. In addition I wound to his left cm. The N Weekly Nur 4/6/23 lacked any On 4/6/23 at 10:1 in bed on his back having his feet off boot in the chair, wheelchair seat. W Nursing (ADON) co dressing changes heel dressing had 1 cm x 1 cm. The k open area to the k	that Resident #22 had an kin integrity due to a pressure area measured 1 cm x 0.5 cm. The rent treatment with Mepilex to onal weekly wound assessment d 3/27/23 - 4/2/23 listed that stage III wound to his coccyx that 0.5 cm. The description listed the ith slough (stringy dying tissue) , the spreadsheet included a stage t heel that measured 1.5 cm x 1 rsing Skin Assessment dated v documentation. 6 AM observed Resident #22 lying t wearing black shoes without cloaded, with his green Prevalon and the waffle cushion on his Natched the Assistant Director of omplete his treatments and to his coccyx and left heel. His left no date and the blister measured poister appeared intact with an pottom left of the blister, the asure that open area. Resident noved from his buttock listed a			

Number 6103			Report dat May 12, 20		port date ay 12, 2023
Facility name Countryside Health Care Center			Survey date April 3, 202		3, 2023
Facility address 6120 Morningsic	le Avenue				
City Sioux City		JB			
Rule or Code Section	N	lature of Violation	Class	Fine Amount	Correction Date
	top of his coccyx w shearing (remova that area. Staff S, assisted with the completed the tree while he stayed in in his chair, no ob room other than t noted positioning what things they of Staff S replied that the time, but they bed. The ADON ex wounds weekly an Administrator. On 4/7/23 at 3:47 Aide (CMA), state meals and reposit least that's what s asked what they of protecting his hee notice anything w came to the facilit not know when th asked when the b	have an open white area at the with very superficial (not deep) of skin in one direction) below Certified Nursing Assistant (CNA), treatment. After the ADON eatment, Staff S left his shoes off bed. The Prevalon boot remained servation of pillows found in his the one used for his head, and no wedges present. When asked did to help prevent further issues, t they did not offload his feet at assisted him with repositioning in cplained that she measures the nd reports her findings to the PM Staff N, Certified Medication d they got Resident #22 up for his ioned him every two hours. At she does when she works. When do to assist with healing and el blister, she stated she did not ith his feet. She added that he ty with the Prevalon boot but did he facility stopped using it. When lister on his heel opened, she t know he had a blister on his heel.			

Number 6103					eport /lay 12	
Facility name Countryside Health Care Center			Survey date April 3, 2023	23		
Facility address 6120 Morningsid	le Avenue					
City Sioux City		JB				
Rule or Code Section	N	lature of Violation	Class	Fine Amour	nt	Correction Date
	spreadsheet dated Resident #22 had measured 0.5cm x wound as healing tissue. In addition stage II red blister measured 1 cm x be half open stage The Electronic Hea documented weed #22's coccyx press left heel blister on 3/18/23, 3/25/23, also lacked a docu for 4/1/23. Resident #22's clin wound assessmen On 4/11/23 at 10: not in bed and on room on his bed. the floor. Residen by the nurse's staf foot pedals on his the foot pedals. A in bed, lying on hi and his feet touch	 anal weekly wound assessment d 4/3/23 - 4/9/23 listed that stage III wound to his coccyx that c 0.7 cm. The description listed the open with pink slight slough a, the spreadsheet included a wound to his left heel that 1 cm. The area continued to still e I red blister with an intact area. alth Record (EHR) failed to include kly skin assessments for Resident sure wound and Resident #22's a 2/22/23, 3/1/23, 3/11/23, and 4/8/23. The left heel blister imented weekly skin assessment hical record lacked the weekly hts provided by the ADON. 42 AM witnessed Resident #22 ly one pillow remained in his His green Prevalon boot laid on t #22 noted in the commons area tion wearing black shoes, with wheelchair, with feet resting on t 3:34 PM observed Resident #22 s back, wearing his black shoes ted the footboard. Witnessed the				

Number 6103]			port date ay 12, 2023
Facility name Countryside Health Care Center			Survey date April 3, 202	3, 2023	
Facility address 6120 Morningsic	le Avenue				
City Sioux City		JB			
Rule or Code Section	Ν	Nature of Violation	Class	Fine Amount	Correction t Date
	#22 has a mattress ulcers. She added he is supposed to protect/cushion h though that he re- should be wearing shoes add a layer came to the facilit then popped, and coccyx wound on when wound asses stated on admissi assessment. Her n to the wounds an has an open area assessments shou working with nur- measurements w there are times w the dressing and the and she does not When asked if Re- additional wound health records (El answered that sh- weekly that she p to the Administra	BO PM the ADON stated Resident as top to help with his pressure I that he has a Prevalon boot that wear every day to help his left heel. The nurses told her fused to wear it. When asked if he g his shoes she replied that his of protection. When Resident #22 ty his heel just had a blister on it, it d opened. She thought he had his admission as well. When asked essments should be completed she on a nurse should complete a full hurses are her eyes when it comes d will report to her if a resident then she will go look at it. Skin ald be completed weekly. She is ses to complete the ith the dressing changes because when she wants to see the wound, treatment are already completed want to take that dressing off. sident #21 or Resident #22 had assessments as their electronic HR) lacked weekly assessment, she e completes her own assessments buts on a spreadsheet and emails tor. The ADON reported they are at's clinical record.			

Number 6103					Report May 12	
Facility name Countryside Health Care Center			Survey date April 3, 202		13, 202	23
Facility address 6120 Morningsic	le Avenue					
City Sioux City		JB				
Rule or Code Section	N	lature of Violation	Class	Fine Amou	unt	Correction Date
	in bed, on his bac offloaded. When the green boot or #22 said no. He in staff asked him. H off while he laid in take them off if th that they did not laid in bed but wo On 4/11/23 at 3:3 Nurse (LPN), expla repositioned even Staff J added that and could be non She stated he sho and not wear his s he is pretty good On 4/11/23 at 5:4 repositioned Resis sit up very long. S complied with thi know he had a bli On 4/11/23 at 6:0	20 PM observed Resident #22 lying k, black shoes on, without his feet asked if the staff ask him to wear in the floor under his bed, Resident dicated he would wear it if the le said they did not take his shoes in bed but he would allow them to ney asked him. Resident #22 added put pillows under his feet while he build allow them to do so. 25 PM Staff J, Licensed Practical ained that Resident #22 should be by two hours from side to side. at times he repositioned himself compliant with staying on his side. Fuld have a boot on while in bed shoes. She added there are times with wearing boots. 49 PM Staff Q, CMA, stated they dent #22 and ensured he did not taff Q added that she felt he s. Staff Q indicated she did not ster on his left heel. 40 PM Staff V, CMA, reported that he had a blister or a wound on his				

Number 6103				-	rt date 12, 2023
Facility name Countryside Health Care Center			Survey date April 3, 202	2023	
Facility address 6120 Morningsio	de Avenue				
City Sioux City		JB			
Rule or Code Section	Ν	lature of Violation	Class	Fine Amount	Correction Date
	usually reposition chair. They would leave his shoes or rub against his he and positioning w of a Prevalon boo is not a morning p noncompliant but be more cooperat On 4/11/23 at 8:0 Resident #22 is to elevate his feet of himself but will be the overnight shif his feet she indica When asked if he is in his room, she needed it.	O PM Staff T, CMA, explained that be repositioned and they are to ff the mattress. He does move by compliant with repositioning on t. When asked how they elevate ated they will use a pillow or two. is to wear the Prevalon boot that e stated no one had told her he			
	sitting in his whee wearing shoes wit Prevalon boots re	24 AM observed Resident #22 elchair in the commons area th his feet on the foot pedals. The mained on the floor under his bed ow observed in his room and no es noted.			
	prevented new w	2 PM when asked how they are ounds and assisted with healing bunds, the Director of Nursing			

Number 6103				-	ort date 12, 2023
Facility name Countryside Health Care Center			Survey date April 3, 202	2023	
Facility address 6120 Morningside	e Avenue				
City Sioux City		JB			
Rule or Code Section	N	lature of Violation	Class	Fine Amount	Correction Date
	cares and repositi reposition becaus himself side to sid just needs to be re- his heel it is to be pillows or those g Prevalon boot. Aff only having one p wedges, and his P floor the last two the DON that Resi allow pillows and well as allowing st bed, she stated of be off she indicate wound herself to On 4/13/23 at 11: sitting in his whee room wearing his foot pedals. The g the floor under hi room, and no pos Resident #22's Pro- documentation re- work or of him ref	t they completed incontinent oning. The staff remind him to e he can and will reposition le. He will sit up in his wheelchair, eminded to reposition himself. For offloading while in bed with reen positioning wedges, or his ter notification of Resident #22 illow in his room, no positioning revalon boot in his chair or on the days she said ok. After informing ident #22 indicated he would the use of his Prevalon boot, as taff to remove his shoes while in k. When asked if his shoes should ed she would need to see the determine that. 49 AM witnessed Resident #22 elchair being assisted to the dining black shoes and his feet on the green Prevalon boot remained on s bed with only one pillow in his itioning wedges in his room. ogress Notes lacked elated to interventions that did not fusing interventions. sure Injury/Skin Breakdown- s approved in June 2022,			

Number 6103 Facility name Countryside Health Care Center				-	oort date y 12, 2023
			Survey date April 3, 202		, 2023
Facility address 6120 Morningsio	de Avenue				
City Sioux City		JB			
Rule or Code Section	N	lature of Violation	Class	Fine Amount	Correction Date
	developing pressu staff are to exami and/or re-admissi of a Stage 1 press ulcerated at the su complete an evalu upon the need an staff will impleme prevention and ca Interdisciplinary T	and resulting risk factors for ure ulcers upon admission. The ne the skin of a new admission on for ulcerations or indications ure area that has not yet urface. The nursing staff will uation of the skin weekly. Based d results of the evaluations the ent interventions for the are of skin issues. The ream (IDT) will review measures quarterly, and with significant			

Number 6103				Report May 1	t date 2, 2023
Facility name Countryside Heal	th Care Center		Survey dates April 3, 2023 - April 13, 2023		
Facility address 6120 Morningside	e Avenue				
City Sioux City		JB			
Rule or Code Section	N	ature of Violation	Class	Fine Amount	Correction Date
	FACILITY RESPON	ISE			

Number 6103				t date 2, 2023	
Facility name Countryside Hea	Ith Care Center		Survey date April 3, 202	es 3 - April 13, 2()23
Facility address 6120 Morningsid	le Avenue				
City Sioux City		JB			
Rule or Code Section	1	Nature of Violation	Class	Fine Amount	Correction Date
58.43(9)	resident shall rec care at all times a physical, sexual, a neglect, and phys free from chemic follows: when aut for a specified pe emergency to pro the resident or to may be authorize personnel who pu the physician; and disabled individua physician and aut intellectual disable behavior modifica supports used in proper body posit considered to be 58.43(9) Allegation Allegations of deg reported and inve chapter 235E and DESCRIPTION Based on clinical records, and staff	c) Resident abuse prohibited. Each eive kind and considerate and shall be free from mental, and verbal abuse, exploitation, sical injury. Each resident shall be al and physical restraints except as thorized in writing by a physician riod of time; when necessary in an otect the resident from injury to others, in which case restraints d by designated professional comptly report the action taken to d in the case of an intellectually al when ordered in writing by a chorized by a designated qualified ilities professional for use during ation sessions. Mechanical normative situations to achieve tion and balance shall not be a restraint. (II) ons of dependent adult abuse. Dendent adult abuse shall be estigated pursuant to Iowa Code 1481—Chapter 52. (I, II, III)		\$500 Held in Suspension	Upon Receipt

Number 6103					eport date lay 12, 2023
Facility name Countryside Health Care Center			Survey date April 3, 202	.3, 2023	
Facility address 6120 Morningsi					
City Sioux City		JB			
Rule or Code Section		lature of Violation	Class	Fine Amoun	Correction t Date
	reviewed (Resider reported a census	nt #17) fell and died. The facility s of 53 residents.			
	Findings include:				
	assessment dated of 12/30/22 from The MDS identifie Status (BIMS) sco impaired cognitio #17 required the persons with bed Resident #17's Ad dated 12/22/22 si revealed: 1. Resident #17 fe had two other fal 2. Resident #17's a. UTI (urinary tra b. Dementia	A 1/3/23 listed an admission date an acute (short-term) hospital. ed a Brief Interview of Mental re of 4, indicating severely n. The MDS listed that Resident extensive assistance from two mobility, transfers, and toilet use. Imission History and Physical igned by a Physician's Assistant ell at her home on 12/20/22 and ls in the prior four days. diagnoses included the following: act infection) All (a type of heart attack)			
	that the Certified nurse to Resident (due to) her not ro #17's room discov beside her bed or	on 1/25/23 at 6:20 AM revealed Medication Aide (CMA) called a #17's room at 5:18 AM due to esponding. Upon entry to Resident vered her lying on a mattress her stomach with her head it side. The CMA and Registered			

Number 6103 Facility name Countryside Health Care Center					port date ay 12, 2023
			Survey date April 3, 202		3, 2023
Facility address 6120 Morningsic	le Avenue				
City Sioux City		JB			
Rule or Code Section	N	lature of Violation	Class	Fine Amount	Correction Date
	Resident #17 appr her lips and nail b could not get a bl saturation (O2 sat have a respiratory breathing. The nu it did not have any did not see anythi that Resident #17 code status. The CM Director of Nursin answer. The nurse a complete set of Resident #17, uns remained on her I Medical Technicia reported that she morning (AM) me At that time Resid and took her pills gave another resid resident call out s When she entered her on the mattre stomach down on facing left. The CM	Resident #17 onto her left side. eared pale, cold to the touch with eds cyanotic (blue). The nurse bod pressure (BP), an oxygen c), or a pulse. Resident #17 did or rate of 6 with very shallow rse assessed her airway to ensure y blocking it, in which the nurse ing visible. The nurse confirmed had a do not resuscitate (DNR) CMA called 911 at 5:22 AM while ygen (O2) at 8 L (Liters) via a full- AA attempted to contact the g (DON) at 5:30 AM with no e made several attempts to obtain vital signs (VS) and arouse uccessfully. Resident #17 eft side until the Emergency ins (EMTs) arrived. The CMA passed Resident #17's early dications about 10 minutes prior. lent #17 appeared awake, alert, without incident. While the CMA dent their pills, the CMA heard the o she went to check Resident #17. d Resident #17's room she found ss beside her bed with her the mattress and she had head AA turned Resident #17's head to o d her not responding so she assess the situation. The EMTs			

Number 6103				-	ort date / 12, 2023
Facility name Countryside Heal	th Care Center		Survey date April 3, 202		2023
Facility address 6120 Morningsid	e Avenue				
City Sioux City		JB			
Rule or Code Section	N	ature of Violation	Class	Fine Amount	Correction Date
	5:42 AM to the encalled Resident #1 AM and reported unresponsive, so the paged the physicial AM. The facility reference 6:11 AM that Resident the ER. The nurse the DON to notify Resident #17's Cense she died 1/25/23 listed as atherosold the manner of deal The facility lacked the state agency at 1/25/23. The Incident or Unpolicy with a last mail a. The facility admin following events the existing guidelines i. Death of a reside of unnatural cause accidents, etc.). b. Unusual occurre appropriate agence	rtificate of Death revealed that at 5:45 AM with a cause of death erotic cardiovascular disease and ath as natural. documentation of notification to after Resident #17 fell and died on nusual Event Reporting, All Types reviewed date of 10/22 revealed: ninistration will report the o appropriate agencies per their			

Number 6103					port date ay 12, 2023	
Facility name Countryside Health Care Center			Survey dates April 3, 2023 - April 13, 2023			
Facility address 6120 Morningsic	le Avenue					
City Sioux City		JB				
Rule or Code Section	Nature of Violation		Class	Fine Amount	Correction t Date	
	such incident or as otherwise required by federal and state regulations, example a suspected crime or serious injury within two hours. c. A written report detailing the incident and actions taken by the facility after the event shall be sent or delivered to the state agency (and other appropriate agencies as required by law) as required by federal and state regulations. 4. The administration will keep a copy of written reports on file. In an Electronic Mail (email) dated 4/5/23 at 12:56 PM, the Administrator reported that there were no incidents reported to the state agency in January 2023. In an interview on 4/6/23 at 8:47 AM, the DON reported that she reviewed the incident with the corporate nurse consultant who advised her to not report the fall with death to the state agency because the resident did not die as a result of the fall.					

Number 6103					rt date 12, 2023		
Facility name Countryside Health Care Center		-		Survey dates April 3, 2023 - April 13, 2023			
Facility address 6120 Morningsi							
City Sioux City		JB					
Rule or Code Section	Ν	lature of Violation	Class	Fine Amount	Correction Date		
	FACILITY RESPON	SE					