

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

Number 6153					Report date July 11, 2023
Facility name Countryside Health Care Center		Survey dates June 14, 2023 - June 21, 2023			
Facility address 6120 Morningside Avenue					
City Sioux City		JB			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction Date	
50.7(1)a(2)	<p>481—50.7(10A,135C) Additional notification. A health care facility shall notify the department within 24 hours, or the next business day, by the most expeditious means available (I,II,III):</p> <p>50.7(1) Of any accident causing major injury.</p> <p><i>a.</i> “Major injury” shall be defined as any injury which:</p> <p>(2) Requires admission to a higher level of care for treatment, other than for observation; or</p> <p>DESCRIPTION</p> <p>Based on record review, staff interviews, and facility policy review the facility failed to report reportable events for 2 of 3 residents reviewed (Resident #6 and #7) for reportable incidences.</p> <p>Findings include:</p> <p>1. Resident #6’s Minimum Data Set (MDS) assessment dated 5/21/23 identified a Brief Interview of Mental Status (BIMS) score of 11, indicating moderate cognitive impairment. The MDS indicated that she required extensive assistance of one person for bed mobility, transfers, dressing, and toilet use. The MDS listed one fall with major injury since admission or her prior assessment. The MDS included diagnoses of chronic obstructive pulmonary disease (COPD, long-term long disorder that affects breathing), thyroid (a</p>	II	<p>\$500.00</p> <p>Held in Suspension</p>	Upon Receipt	

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	<p>gland that makes and stores hormones that help regulate the heart rate, blood pressure, body temperature, and the rate of food converted into energy) disorder, stroke, and seizures.</p> <p>The Care Plan Focus area revised 6/6/23 indicated she had a risk for falls due to her impaired balance, poor safety awareness, neuromuscular/functional impairment (affect the function of muscles due to problems with the nerves and muscles in your body) and/or the use of medications that may increase falls risks. The Care Plan included the following Interventions:</p> <p>a. Dated 5/17/23: Encourage her to ask for assistance when she wanted to transfer or ambulate (walk).</p> <p>b. Dated 5/30/23: Uses a bed and a chair alarm for safety.</p> <p>c. Dated 5/30/23: Place a fall mat beside her bed to prevent injuries.</p> <p>The Nurses Note dated 5/20/23 at 6:51 PM documented by Staff A, Licensed Practical Nurse (LPN), reflected that a Certified Nursing Assistant (CNA) told her a resident fell and the Director of Nursing (DON) was with her. The staff found Resident #6 in her wheelchair. The DON assessed Resident #6's vital signs and for injuries. The assessment revealed no injuries. Resident #6 complained of pain to the left side of her head, left hip, and left lateral thigh. Resident #6 reported that</p>				

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	<p>she fell and hit her head trying to get up to go to the bathroom to curl her hair with a curling iron her family brought in for her. Staff A received orders to send Resident #6 to the Emergency Room (ER) to evaluate for any trauma or injury. At 10:38 PM the hospital reported that they planned to admit Resident #6 for a left hip fracture. Resident #6 would have surgery in the morning and would begin rehab at the hospital after surgery.</p> <p>On 6/14/23 at 3:31 PM the facility was asked to provide the investigative file for Resident #6's fall that resulted in a fracture. At 4:52 PM the facility emailed the Incident Report (IR), at 4:56 PM the facility emailed the neurological assessment flowsheet, and at 7:29 PM the facility emailed the self-report form from the state agency's self-report website for facilities.</p> <p>On 6/21/23 at 9:11 AM the State Agency's Complaint Unit indicated the facility did not send Resident #6's Care Plan, the last time staff visualize Resident #6, if she had a history of falls, or staff interviews, etc.</p> <p>The Self-Report document reflected the facility reported the incident to the State Agency on 5/21/23 at 12:39 PM. The facility amended the report on 5/27/23 at 4:53 PM, 5/27/23 at 5:18 PM, and 6/2/23 at 11:37 AM. On 6/9/23 at 3:05 PM the</p>				

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	<p>State Agency changed the incident from pending review to investigation.</p> <p>2. Resident #7's MDS assessment dated 5/17/23 identified a BIMS score of 0, indicating severe cognitive impairment. The MDS indicated that he required supervision of one staff for transfers, dressing, eating, and toilet use. The MDS included diagnoses of Parkinson's disease (A chronic and progressive movement disorder that initially causes tremor in one hand, stiffness or slowing of movement), anemia (low level of iron in the blood), dementia, traumatic brain injury, anxiety, depression and schizophrenia (mental illness that includes hallucinations and delusions).</p> <p>The Care Plan Focus area revised 6/1/23 indicated that Resident #7 had the potential of being physically aggressive due to dementia, mood disorder, and schizoaffective disorder. He ran his wheelchair into another resident's wheelchair and yelled profanity at this other resident.</p> <p>The progress note dated 5/28/23 at 11:26 PM documented by Staff A indicated that Resident #7 started having increasing anxiety and tearful throughout the day. He could not finish his sentences and struggled to explain how he felt. He could not explain what bothered him and said that he did not know how to keep his thoughts clean. Resident #7 wheeled himself in his wheelchair fast</p>				

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	<p>throughout the hallways and ran in to Resident #22's wheelchair foot pedal with his wheelchair. Resident #22 yelled "ouch," Resident #7 stopped, looked at her and told Resident #22 to "fuck off." He then continued to wheel himself around the nurse's station and the front entrance. When he came back around to Resident #22 he said "well there goes that bitch" then continued to go into his room. The nurse assessed the residents and found no injuries for either resident.</p> <p>The Facility's Self-Report form revealed an approximate date and time as 5/28/23 at 11:02 PM that the incident happened. The form indicated the person reporting the incident learned of the incident on 5/30/23. The facility submitted to the incident to the State Agency on 5/30/23 at 10:38 PM.</p> <p>On 6/20/23 at 11:52 AM attempted to call Staff A. Due to no answer, left a voicemail and sent a text message. Staff A failed to return the call prior to the end of the survey.</p> <p>On 6/21/23 at 1:00 PM when questioned about how soon they should report information to the State Agency, the Director of Nursing (DON) responded that the requirement is that the facility makes the initial report within 24-hours then a summary within five days. When asked why the facility provided more information related to</p>				

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	<p>Resident #6's fall to the office, she replied that online it indicated the incident was going to be investigated. When asked why the facility did not submit the five-day summary timely, she replied that on day 5, the facility's scheduled nurse call in and could not work the day and evening shift. Due to the nurse calling it, it left her working on the floor. She reported feeling overwhelmed that day due to receiving three admissions that day. She came in that Saturday, the next day, to submit the five-day summary. The DON explained that the staff did not report Residents #7 and #22 incidents to her when they happened. Once she learned of the incident, she reported it to the State Agency office. She did not know why the nurse who worked did not report it.</p> <p>On 6/21/23 at 4:54 PM the Administrator stated that the staff did not report Resident #7 and Resident #22 incident to them after it happened. They did not know about the incident until two days after it happened. When asked why the facility did not do a complete report when Resident #6 fell, she responded that the DON told her she did not do a full report because it went from pending to investigation and the survey team would look at it during the revisit. The Regional Director and herself developed a corrective action plan because in their point of view it does not matter if the report says its pending or investigation, they still must do a full report. They re-educated the DON on this.</p>				

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	<p>The Reporting of Abuse Allegations Policy, revised October 2022, indicated all suspected violations and all substantiated incidents of abuse, neglect, exploitation, or mistreatment, including injuries of unknown sources and misappropriation will be immediately reported to appropriate state agencies and other entities or individuals as required by law. An alleged violation is a situation or occurrence that someone observes or reported by staff, resident, relative, visitor, another health care provider, or others but has no investigation and, if verified, could be noncompliance with the Federal requirements related to mistreatment, exploitation, neglect, abuse, including injuries of unknown source, and misappropriation of resident property. The facility should report a suspected violation, a reasonable suspicion, or a substantiated incident of abuse. The facility Administrator, or designee in their absence, will promptly notify the state licensing/certification agency responsible for surveying/licensing the facility. The initial report, due at either 2 hours or 24 hours, should include enough information to describe the alleged violation and indicate the protection provided to the residents. The facility should provide as much information as possible, to the best of what is known at the time. The follow-up report is due within 5 working days. This report should provide enough information to describe the results of the</p>				

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	<p>investigation, indicate any corrective actions taken, and if the facility verified the allegation.</p> <p>The Incident or Unusual Occurrence Reporting, All Types policy, revised October 2022 indicated as required by federal or state regulations, the facility administration reports unusual occurrences or other reportable events which affect the health, safety, or welfare of the residents, employees or visitors. The facility should send a written report detailing the incident and actions taken by the facility after the event to the state agency (and other appropriate agencies as required by law) as required by federal and state regulations.</p>				

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	FACILITY RESPONSE				

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