

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

Citation Number: #6163					Date: July 19, 2023
Facility Name: Bishop Drumm		Survey Dates: June 19, 2023 – June 29, 2023			
Facility Address/City/State/Zip 5837 Winwood Drive Johnston, Iowa 50131					
		LG			
Rule or Code Section	Nature of Violation	Class	Fine Amount	Correction date	

50.7(1)a(3)	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): 50.7(1) Of any accident causing major injury. <i>a. "Major injury" shall be defined as any injury which:</i> (3) Requires consultation with the attending physician, designee of the physician, or physician extender who determines, in writing on a form designated by the department, that an injury is a "major injury" based upon the circumstances of the accident, the previous functional ability of the resident, and the resident's prognosis. DESCRIPTION: Based on clinical record review and staff interviews the facility failed to report a major injury to the Department of Inspections and Appeals (DIA) for 1 of 7 residents (Resident #114) reviewed. Facility reported a census of 110 residents.	Class II	\$500.00	Upon Receipt
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Facility Administrator

Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty-five percent (35%) pursuant to Iowa Code section 135C.43A (2013).

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	Findings include: The Minimum Data Set (MDS) dated 3/15/23 for Resident #114 documented a Brief Interview of Mental Status (BIMS) of 12 out of 15 indicating some cognitive loss. The MDS documented the resident required extensive assist of two persons for bed mobility, transfers, dressing and toileting. The MDS documented the resident did not ambulate during the look back assessment period. The MDS documented the resident had diagnoses to include heart failure, hypertension, peripheral vascular disease, renal insufficiency, diabetes, anxiety and depression. The MDS documented the resident did not have any falls since the last assessment. The Care Plan dated 12/12/22 for Resident #114 documented the resident was at risk for falls. The Progress Notes for the resident documented the following: On 3/17/23 at 6:47 PM received a call from the executive assistant with bus transportation that the resident fell out of her wheelchair in the bus on her way back from dialysis and has been taken to the hospital.			
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	On 3/18/23 at 8:59 AM call place to the hospital and informed the resident is still in the emergency room awaiting a bed due to a femur fracture. The hospital Discharge Summary dated 3/25/23 documented the resident admitted to the hospital on 3/17/23 with a closed left femoral fracture and had femur open reduction internal fixation on 3/19/23. Interview with Staff V, Registered Nurse, on 6/21/23 at 11:15 AM revealed she was working the day she received a call about Resident #114's incident. She stated she was told the resident had an accident during transport back to the facility. She then called the on-call nurse, and reported the information to her. Interview with the Administrator on 6/22/23 at 11:15 AM revealed he was not aware Resident #114 had a major injury until the day of report submission on 3/27/23. He further stated the facility policy reporting timeline to DIA for major injuries is within 2 hours after an occurrence. Interview with the Assistant of Director of Nursing (ADON) on 6/22/23 at 12:30 PM revealed she was not given a report by an on-call nurse about the incident. When she learned about the incident during a			
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	morning stand-up meeting, she was told by the Administrator that he would report it to DIA. She also stated that the staff were provided training on reporting major injuries and timeframes for reporting after the incident. FACILITY RESPONSE:			
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