Department of Inspections, Appeals, and Licensing
Health & Safety Division
Citation

Citation Number #11192			**Report date** July 28, 2026
Facility name Hillcrest Home		**Survey dates** June 29, 2026 - July 2, 2026	
Facility address 915 West First Street			
City Sumner, IA 50674	**KBS**		

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. *a.* "Major injury" shall be defined as any injury which: (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, facility record review, and staff interviews, the facility failed to report a fall with a major injury to the Iowa Department of Inspections, Appeals, and Licensing (DIAL) within 24 hours for 1 of 1 resident reviewed (Resident #28). The facility reported a census of 51 residents. Findings include: Resident #28's Minimum Data Set (MDS)	**Class II**	**$500.00**	**Upon Receipt**

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).

Facility Administrator _____ Date _____

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	assessment dated 5/4/26 revealed the resident had severely impaired cognitive skills for daily decision making. The MDS also documented diagnoses of hypertension, arthritis, hip fracture, osteoporosis, and Parkinson's disease. The MDS also reported Resident #28 was coded as dependent (helper does all of the effort. The resident does none of the effort to complete the activity. Or, the assistance of 2 or more helpers is required for the resident to complete the activity) to roll left and right, for sit to lying, for sit to stand, for chair/bed to chair transfer, and for toilet transfer. Review of the Incident Report dated 4/27/26 at 1:38 a.m. revealed Resident #28 had an unwitnessed fall. The Incident Report Progress Note dated 4/27/26 at 2:35 a.m. revealed staff heard a noise at the nurses station. Resident #28 reported to be lying on the left side near another room. Resident #28 stated she was getting up to go to the bathroom. Resident #28 complained of left hip/leg pain and unable to straighten left leg at this time due to pain. Resident #28 assisted up via hoyer (mechanical lift) to bed. Cares completed and Resident #28 unable to straighten leg at this time. Resident #28 assisted to wheelchair via hoyer and transported to emergency room. Resident #28 utilized her walker and had grippy socks in place at time of the incident.			

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	Review of the facility progress note dated on 4/27/26 at 2:42 a.m. revealed Resident #28 noted to have a fall, complained of left hip/leg pain and wanted to go to the emergency room for x-ray. Resident #28 unable to straighten leg at this time. The on-call physician notified, and report called to the emergency room. Major injury form sent and Resident #28 transferred in a wheelchair by staff. Review of the facility progress note dated 4/27/26 at 6:00 a.m. revealed the nurse received an update from the emergency room stating Resident #28 will be transferred out to have surgery due having shattered her hip. Review of the major injury form dated 6/26/26 revealed the form was marked a major injury. Review of the facility self reported incidents to DIAL lacked notification of the major injury. On 7/1/26 at 4:25 p.m., the Administrator stated I report everything. The Administrator stated she didn't know that this happened at the time. She stated that it was not on their communication board in the electronic health record. The Administrator stated the major injury form didn't get back to us until late, and the Administrator knew it could have been reported without.			

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	FACILITY RESPONSE			

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