

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 165266	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/07/2025
NAME OF PROVIDER OR SUPPLIER Holy Spirit Retirement Home		STREET ADDRESS, CITY, STATE, ZIP CODE 1701 West 25th Street Sioux City, IA 51103	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0842 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards. (continued on next page)

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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<p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on clinical record review, staff interview, and policy review the facility failed to provide complete and accurately documented electronic health records for 4 of 5 residents (Residents #2, #5,#6, and #7) reviewed. The facility reported a census of 61 residents. Findings include: 1. Review of Resident #2's Minimum Data Set (MDS) dated [DATE] revealed a Brief Interview for Mental Status (BIMS) score of 12 indicating moderate cognitive impairment. The MDS further revealed diagnoses of heart failure, peripheral vascular disease, renal insufficiency, diabetes mellitus, and chronic obstructive pulmonary disease. Review of Resident #2's Electronic Healthcare Record (EHR) page titled, Clinical Immunizations revealed Resident #2 refused the Covid-19 vaccine. Review of Resident #2's EHR page titled, Progress Notes revealed no entry of Resident #2 refusing the Covid-19 vaccine. 2. Review of Resident #5's MDS dated [DATE] revealed a BIMS score of 15 indicating intact cognition. The MDS further revealed diagnoses of coronary artery disease, renal insufficiency, diabetes mellitus, and a personal history of Covid-19. Review of Resident #5's Electronic Healthcare Record (EHR) page titled, Clinical Immunizations revealed Resident #5 refused the Covid-19 vaccine, influenza vaccine, and the pneumococcal vaccine. Review of Resident #5's EHR page titled, Progress Notes revealed no entry of Resident #5 refusing the Covid-19 vaccine, influenza vaccine, or the pneumococcal vaccine. 3. Review of Resident #6's MDS dated [DATE] revealed a BIMS score of 14 indicating intact cognition. The MDS further revealed diagnoses of heart failure, peripheral vascular disease, diabetes mellitus, and chronic obstructive pulmonary disease. Review of Resident #6's Electronic Healthcare Record (EHR) page titled, Clinical Immunizations revealed Resident #6 refused the Covid-19 vaccine. Review of Resident #6's EHR page titled, Progress Notes revealed no entry of Resident #6 refusing the Covid-19 vaccine. 4. Review of Resident #7's MDS dated [DATE] revealed a BIMS score of 10 indicating moderate cognitive impairment. The MDS further revealed diagnoses of chronic obstructive pulmonary disease, and respiratory failure. Review of Resident #7's Electronic Healthcare Record (EHR) page titled, Clinical Immunizations revealed Resident #7 refused the Covid-19 vaccine. Review of Resident #7's EHR page titled, Progress Notes revealed no entry of Resident #6 refusing the Covid-19 vaccine. Interview on 10/06/25 at 1:05 PM with the Director of Nursing (DON) revealed she didn't have declination forms signed if residents refused vaccines. The DON further revealed the facility does have acceptance forms. The DON then revealed that she gives the vaccinations at the facility, and she only marks if it is accepted by the resident. The DON revealed that if the resident had a lower BIMS score or had a medical Power of Attorney (POA) then the facility would contact them if they would want their loved ones to have the vaccine or not. The DON again revealed that the facility would only mark on the form if they accepted the vaccine, or if a POA refused that it would be documented in the progress notes. Interview on 10/7/25 at 8:15 AM with the Administrator revealed that her expectation would be for when a vaccine is refused for it to be charted in the medical records with a declination form signed. Review of a facility provided policy titled, Vaccination of Residents with a revision date of October 2019 revealed: a. If vaccines are refused, the refusal shall be documented in the resident's medical record.</p>		