STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	165325	A. Building B. Wing	06/25/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Manor House Care Center	1212 South Stuart Street Sigourney, IA 52591

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 0690 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations, record review, staff interviews, and the facility policy, the facility failed to keep a urinary catheter bag off the floor for 1 of 2 residents reviewed for urinary catheters (Resident #42). The facility reported a census of 43 residents. Findings include:The Minimum Data Set (MDS) assessment dated [DATE] revealed Resident #42 scored a 15 out of 15 on the Brief Interview for Mental Status (BIMS) exam, which indicated cognition intact. The MDS indicated resident dependent with toileting hygiene and used an indwelling catheter. The MDS revealed medical diagnoses for renal insufficiency and neurogenic bladder. The MDS indicated the resident took a diuretic. The Care Plan revealed a focus area dated 3/5/26 for use of an indwelling catheter related to comfort for end of life and fluid overload. The interventions dated 3/5/26 indicated to ensure dignity bag remained in place, monitor tubing for kinks and leaks, and ensure tubing remains off the floor. The Electronic Medical Record (EMR) revealed the following Physician Orders dated 3/5/26:16 Fr (french) 5 cc (milliliters) Foley Catheter with Foley drainage bag due to hospice level of care and to promote skin integrity. Change foley catheter every 30 days.Change Foley drainage bag every 2 weeksDuring an interview on 6/22/26 at 11:35 AM, Resident #42 stated she had a urinary catheter since being in hospice and retaining fluid. During an observation on 6/22/26 at 11:35 AM, Resident #42 catheter bag hung on the side of the trash can and touched the floor. The trash can had trash in it. During an observation on 6/23/26 at 1:44 PM, Resident #42 sat in her recliner and her catheter bag hung on the trash can and touched the floor. During an observation on 6/24/26 at 4:30 PM, Resident #42 sat in the recliner and her catheter bag hooked to the trash can and touched the floor.During an observation on 6/25/26 at 7:50 AM, Resident #42 sat in the recliner and the catheter bag hooked to the side of the trash can and touched the floor. During an observation on 6/25/26 at 9:14 AM, Resident #42 sat in her recliner and the catheter bag hooked on the recliner and touched the ground. During an interview on 6/25/26 at 9:36 AM, Staff A, Certified Nurse Aide (CNA) queried if the urinary catheter bag can touch the floor and Staff A confirmed the catheter bag cannot touch the floor. Staff A asked where she placed the catheter bag and Staff A stated they hooked it to the trash can so it hung higher. During an interview on 6/25/26 at 9:55 AM, Staff B, CNA asked if the urinary catheter bag can touch the floor and Staff B confirmed the catheter bag should be off the floor. Staff B asked if they ever seen Resident #42 catheter bag on the floor and Staff B stated they had. During an interview on 6/25/26 at 10:52 AM, the MDS Coordinator confirmed the catheter bag should not touch the ground and needed to be placed in a dignity bag because it was an infection control concern. During an interview on 6/25/26 at 12:23 PM, Staff C, Licensed Practical Nurse, LPN asked if a catheter bag can touch the floor and Staff C no, not unless the bag was placed in a dignity bag. Staff C asked if the catheter bag would touch the floor when hooked to the side of the trash can and Staff C confirmed it would and the reason it should touch the ground was to protect the valve on the catheter bag. During an interview on 6/25/26 at 12:31 PM, the Director of Nursing (DON) queried on a urinary catheter bag touching the ground and the DON stated that the catheter bag should not touch the ground for infection control. The DON queried if she noticed the catheter bag touching the ground today prior to observing catheter cares and the DON (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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F 0690 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	confirmed she saw the catheter bag touching the floor. The Facility Catheter Care: Indwelling Catheter Policy dated 12/2023 revealed Validate drainage bag is off the floor and in a dignity bag