

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 165525	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/22/2025
NAME OF PROVIDER OR SUPPLIER The New Homestead Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2306 State Street Guthrie Center, IA 50115	

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)
<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.</p> <p>(continued on next page)</p>

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 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on clinical record review, resident, family, and staff interview, and policy review the facility failed to provide nursing staff to assure residents safety by not responding to call lights in a timely manner for 3 of 3 residents (Resident #1, #2 and #4) reviewed for call lights. The facility reported a census of 47 residents. Findings include: 1. Review of Resident #1's Minimum Data Set (MDS) dated [DATE] revealed a Brief Interview for Mental Status (BIMS) score of 15 indicating intact cognition. The MDS further revealed diagnoses of neurogenic bladder, hyperlipidemia, and multiple sclerosis. Interview 10/21/25 at 8:15 AM with Resident #1's family member revealed that while at the facility on 10/20/25 Resident #1 had their call light on for almost an hour and no staff came to assist Resident #1. Interview 10/21/25 at 9:50 AM with Resident #1 revealed that call lights take over fifteen minutes frequently, and that on 10/20/25 she had a call light on for almost an hour. Resident #1 then revealed that she wears a watch and has a clock on the wall and can read both. 2. Review of Resident #2's MDS dated [DATE] revealed a BIMS score of 15 indicating intact cognition. The MDS further revealed diagnoses of cancer, coronary artery disease, heart failure, renal insufficiency, diabetes mellitus, hyperlipidemia, and liver disease. Interview 10/21/25 at 9:15 AM with Resident #2 revealed that call lights take forever and are always over fifteen minutes to be answered by staff. Resident #2 further revealed that he watches the clock on the wall. 3. Review of Resident #4's MDS dated [DATE] revealed a BIMS score of 15 indicating intact cognition. The MDS further revealed diagnoses of coronary artery disease, hyperlipidemia, encephalopathy, and peripheral venous insufficiency. Interview 10/21/25 at 9:38 AM with Resident #4 revealed that call lights take over fifteen minutes a lot. Resident #4 then revealed that he watches the clock on the wall. Interview 10/21/25 at 9:27 AM with Staff A Certified Nursing Assistant (CNA) revealed that staff do try to answer the call lights in a timely manner, but the screen for call lights is located in the hallway and at the nurses station. Staff A then revealed there are no call lights above the resident's doors. Interview 10/21/25 with the Administrator revealed that call lights are still a little long, but the facility has been working on them. The Administrator then provided the call light logs for the previous 4 days. Interview 10/21/25 at 12:29 PM with Staff B CNA revealed that call lights can take a little longer sometimes, but does try to answer call lights in a quick time. Staff B then revealed that she cannot guarantee that call lights are always answered in fifteen minutes, but does aim for that. Interview 10/21/25 with Staff C CNA revealed that call lights can take a little bit, but the staff does try to answer them in fifteen minutes or less. Follow up interview 10/22/25 at 11:10 AM with the Administrator revealed her expectation would be for call lights to be answered in fifteen minutes or less. Review of a facility provided document titled, Device Activity Report dated 10/18/25 to 10/21/25 revealed several call light times ranging from 16 minutes to 48 minutes in length. This document further revealed that Resident #1's call light on 10/20/25 was on 47 minutes and 6 seconds before being reset. Review of a facility provide policy titled, Call Light Response dated 10/31/24 revealed:a. Staff members are required to respond to resident call lights within 15 minutes of activation.</p>		