STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0013625	A. BUILDING: _____ B. WING _____	C 01/16/2024

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NEW PERSPECTIVE-WEST BEND	2130 CONTINENTAL DR WEST BEND, WI 53095

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N 000	Initial Comments On 01/16/2024, Surveyor completed a complaint investigation at New Perspectives - West Bend, a CBRF in West Bend. Three deficiencies were identified. One deficiency was a repeat deficiency - See Statement of Deficiency (SOD) HUGG11, dated 03/15/2023. The complaint was substantiated. Census: 32	N 000		
N 425	83.38(1)(a) Personal care. As appropriate, the CBRF shall teach residents the necessary skills to achieve and maintain the resident's highest level of functioning. In addition to the assessed needs as determined under s. DHS 83.35(1), the CBRF shall provide or arrange services adequate to meet the needs of the residents in all of the following areas: Personal care. Personal care services shall be designed and provided to allow a resident to increase or maintain independence. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not ensure residents received assistance with personal care needs. This is a repeat deficiency. See Statement of	N 425		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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N 425	Continued From page 1 Deficiency (SOD) HUGG11, dated 03/15/2023. Findings include: On 01/16/2024, Surveyor conducted a complaint investigation alleging residents did not receive assistance with personal cares as needed. The following concerns were identified: Example 1 - Toileting Assistance: INTERVIEWS: On 01/16/2024 at approximately 9:30 a.m., Surveyor interviewed Caregiver C. Caregiver C stated it was very difficult for caregivers to complete toileting cares as needed due to being short-staffed. Caregiver C stated caregivers assisted residents with toileting needs at the time they got resident up for the day, but then usually only assisted with toileting 1 more time during their shift due to other work that needed to be done. Caregiver C stated Resident 4 was a priority to assist with toileting after breakfast because night shift provided his/her morning cares (prior to 6:30 a.m.), but that caregivers weren't always able to get them to the bathroom after breakfast due to other cares being needed. On 01/16/2024 at approximately 10:05 a.m., Surveyor interviewed Caregiver D. Caregiver D reported that s/he typically worked first and second shift. Caregiver D reported that toileting assistance was most difficult to complete during second shift because of staffing patterns. Caregiver D stated there were times toileting assistance only occurred while doing nighttime cares because mealtime took priority. On 01/16/2024 at approximately 10:30 a.m.,	N 425		

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N 425	Continued From page 2 Surveyor interviewed Caregiver B. Caregiver B stated toileting assistance was difficult to provide due to staffing patterns. Caregiver B stated residents should receive toileting assistance every 2 hours, but there were times they were unable to provide toileting assistance, other than during morning cares, until after lunch or not at all. On 01/16/2024 at approximately 12:00 p.m., Surveyor interviewed Caregiver E. Caregiver E stated toileting assistance was difficult to provide due to staffing patterns. OBSERVATIONS: On 01/16/2024 at approximately 9:57 a.m., Surveyor observed Caregiver C assist Resident 4 away from the activity area to provide assistance with toileting. Caregiver C stated that was the first time Resident 4 had received toileting assistance since prior to 6:30 a.m. when night shift had gotten Resident 4 up for the day. Caregiver C reported Resident 4 was incontinent. RECORD REVIEWS: On 01/16/2024 at approximately 11:05 a.m., Surveyor reviewed resident records, which documented the following: Resident 4 was admitted to the provider's facility on 12/31/2021. Resident 4's individual service plan (ISP), dated 01/16/2024, documented "Offer toileting when resident first wakes up for the day, before and after meals and before going to bed." Example 2 - Feeding: OBSERVATIONS:	N 425		

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On 01/16/2024 at approximately 9:05 a.m., Surveyor entered the provider's dining room. Surveyor observed 5 residents with food in front of them and 1 private duty caregiver sitting at a table. Caregiver C stated all 5 residents at the table required assistance with feeding. Surveyor did not observe a caregiver, employed by the facility, assist with feeding.

On 01/16/2024 at approximately 11:30 a.m., Surveyor observed lunch served in the provider's dining room. From 11:30 a.m. to 12:15 p.m., Surveyor observed Caregiver C and Caregiver E stand alongside residents and provide intermittent assistance for Resident 1, Resident 2, Resident 3 and Resident 4. Resident 6 received feeding assistance from his/her private duty caregiver, Private Duty Caregiver H. Surveyor observed Private Duty Caregiver H assist Resident 2 with his/her utensils 2 times and encourage Resident 2 to keep eating 2 times while caregivers were occupied with other tasks.

INTERVIEWS:

On 01/16/2024 at approximately 9:30 a.m., Surveyor interviewed Caregiver C. Caregiver C stated providing the feeding assistance that was required by residents was difficult to do due to the provider's staffing patterns.

On 01/16/2024 at approximately 9:55 a.m., Surveyor interviewed Private Duty Caregiver H. Private Duty Caregiver H stated s/he was solely responsible for providing Resident 6 with feeding assistance but was familiar with the needs of the other residents that sit with Resident 6. Private Duty Caregiver H stated the caregivers did their best to provide feeding assistance, but that the facility was often short of staff to provide

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assistance. Private Duty Caregiver H stated Resident 2 often asked him/her for assistance.

On 01/16/2024 at approximately 10:05 a.m., Surveyor interviewed Caregiver D. Caregiver D stated residents did not receive the feeding assistance they required because caregivers were always busy providing cares.

On 01/16/2024 at approximately 10:30 a.m., Surveyor interviewed Caregiver B. Caregiver B stated s/he couldn't provide the feeding assistance required by residents because s/he was too busy providing care. Caregiver B stated, "If we break to feed, people won't get help getting up."

On 01/16/2024 at approximately 11:50 a.m., Surveyor interviewed Caregiver F. Caregiver F stated s/he couldn't assist with feeding because s/he was busy with medication administration. Caregiver F stated s/he offered encouragement or cues to residents in passing that morning, but didn't think any caregiver sat down and provided feeding assistance with breakfast.

On 01/16/2024 at approximately 12:00 p.m., Surveyor interviewed Caregiver E. Caregiver E stated s/he was unable to sit down with residents to assist with feeding earlier that morning. Caregiver E was unable to confirm whether any caregiver assisted residents with eating for breakfast.

RECORD REVIEWS:

On 01/16/2024 at approximately 11:05 a.m., Surveyor reviewed resident records, which documented the following:

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- Resident 1 was admitted to the provider's facility on 05/30/2023. Resident 1's ISP, dated 01/16/2024, stated, "Caregivers to monitor resident while eating ... Assist resident with feeding when resident is unable to feed him/herself independently."
- Resident 2 was admitted to the provider's facility on 10/26/2013. Resident 2's ISP, dated 01/16/2024, stated, "Resident requires one assist with meals. At times able to assist self. Needs verbal cues set up reminders to stay on task."
- Resident 3 was admitted to the provider's facility on 11/18/2013. Resident 3's ISP, dated 01/16/2024, stated, "Assist resident with feeding in instances that [resident] is not physically able to feed [him/herself] independently."
- Resident 4 was admitted to the provider's facility on 12/31/2021. Resident 4's ISP, dated 01/16/2024, stated, "Assist with set-up as needed ... Encourage small bites, alternating solids and fluids."

REVIEW WITH MANAGEMENT:

On 01/16/2024 at approximately 2:00 p.m., Surveyor interviewed Executive Director A and Health and Wellness Director G regarding personal care concerns. Survey shared observations and interviews that indicated residents did not receive assistance with toileting needs and feeding as needed or indicated in the ISPs. Health and Wellness Director A stated the expectation was for residents to receiving toileting assistance 4-7 times or 8-12 times in a 24-hour period. Health and Wellness Director A and Executive Director A confirmed Resident 1, Resident 2, Resident 3 and Resident 4 required assistance with feeding and acknowledged their ISPs needed to be updated to state physical assistance with eating was required. Surveyor

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N 425	Continued From page 6 reviewed that caregivers stated they frequently were unable to provide toileting assistance and feeding assistance as needed due to the facility's staffing patterns and acuity of the residents. Surveyor reviewed the resident roster with Executive Director A and Health and Wellness Director G, which indicated 13 residents required assist of 2 caregivers and a lift for transfers. Surveyor reviewed the provider's staffing schedule from 09/01/2023 to 01/16/2024, which indicated staffing patterns ranged from 2 to 4 caregivers. Executive Director A responded, "We're actively hiring."	N 425		
N 431	83.38(1)(g) Health monitoring. As appropriate, the CBRF shall teach residents the necessary skills to achieve and maintain the resident ' s highest level of functioning. In addition to the assessed needs as determined under s. DHS 83.35(1), the CBRF shall provide or arrange services adequate to meet the needs of the residents in all of the following areas: Health monitoring. 1. The CBRF shall monitor the health of residents and make arrangements for physical health, oral health or mental health services unless otherwise arranged for by the resident. Each resident shall have an annual physical health examination completed by a physician or an advanced practice nurse as defined in s. N 8.02(1), unless seen by a physician or an advanced practice nurse as defined in s. N 8.02(1) more frequently. 2. When indicated, a CBRF shall observe residents ' food and fluid intake and acceptance of diet. The CBRF shall report significant deviations from normal food and fluid intake patterns to the resident ' s physician or dietician. 3. The CBRF shall document communication with the resident ' s physician and	N 431		

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N 431	Continued From page 7 other health care providers, and shall record any changes in the resident ' s health or mental health status in the resident ' s record. This Rule is not met as evidenced by: Based on observation, interview and record review, the provider did not ensure changes in resident health was documented in resident records. The provider did not have documentation of 11 of 13 residents that had loose stools and/or vomiting in the past 48 hours and Resident 9's skin concerns. Findings include: Example 1 - Change in Condition On 01/16/2024 at approximately 9:20 a.m., Surveyor observed Resident 7 have an emesis in the dining room. Surveyor observed 3 caregivers wearing a mask. On 01/16/2024 at approximately 10:05 a.m., Surveyor interviewed Caregiver D. Caregiver D stated they were behind on cares and laundry because "all the residents have been sick." Caregiver D explained that several residents had loose stools and had vomited in the past 48 hours. On 01/16/2024 at approximately 10:30 a.m., Surveyor interviewed Caregiver B. Caregiver B	N 431		

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stated s/he knew of at least 3 residents that had vomited in the past 48 hours.

On 01/16/2024 at approximately 10:45 a.m., Surveyor requested Executive Director A provide documentation of residents that had loose stools or had vomited in the past 48 hours. Executive Director A provided Surveyor with a list of 2 residents: Resident 7 and Resident 8. Surveyor shared concern that the list provided did not correlate with caregiver interviews.

On 01/16/2024 at approximately 11:50 a.m., Surveyor interviewed Caregiver F, who was responsible for medication administration. Surveyor asked Caregiver F if s/he was aware of any residents that had loose stools or vomited in the past 48 hours. Caregiver F replied, "No. I was wondering why my coworkers were wearing masks."

On 01/16/2024 at approximately 12:10 p.m., Executive Director A provided Surveyor with a new list that identified 4 residents that had vomited and had loose stools since 01/15/2024, 2 residents that had vomited since 01/15/2024 and 7 residents that had loose stools since 01/15/2024. Executive Director A stated s/he had just learned about residents being ill from a caregiver interview. Executive Director A stated the residents changes in condition were not documented in resident records and that the provider would need to complete education regarding the lack of documentation and notification.

Example 2 - Skin Concerns

On 01/16/2024 at approximately 10:05 a.m., Surveyor interviewed Caregiver E. Caregiver E

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stated s/he was worried about Resident 9's skin under his/her breasts. Caregiver B then stated and stated, "Yeah. It smells really bad."

On 01/16/2024 at approximately 11:00 a.m., Surveyor reviewed Resident 9's record. Resident 9 was admitted to the provider's facility on 03/02/2013. Resident 9's individual service plan (ISP), dated 01/16/2024, stated caregivers should promptly report any skin issues or changes in skin condition to the nurse. Resident 9's physician orders included Nystatin Powder (Start Date: 02/25/2022) - Apply topically under breasts as needed as directed for fungal infection.

On 01/16/2024 at approximately 1:00 p.m., Surveyor interviewed Health and Wellness Director G. Surveyor asked if Health and Wellness Director G was aware of any skin concerns with Resident 9. Health and Wellness Director G replied, "No." Surveyor and Health and Wellness Director G went to Resident 9's room and observed peeling of the skin underneath Resident 9's breasts and a strong odor.

On 01/16/2024 at approximately 2:00 p.m., Surveyor reviewed concern with Executive Director A and Health and Wellness Director G that Resident 9 had peeling skin and a strong odor under his/her breasts which was not documented in his/her record. Surveyor reviewed Resident 9's January Medication Administration Record (MAR), which indicated the Nystatin Powder had not been applied at all that month. Executive Director A confirmed s/he smelt a strong odor while examining Resident 9's skin and stated if s/he was made aware of the skin changes s/he would have contacted the physician for instructions to treat.

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N 441	Continued From page 10	N 441		
N 441	83.39(3) Hand washing. Employees shall follow hand washing procedures according to centers for disease control and prevention standards. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure 1 of 4 employees observed followed hand washing/hand hygiene procedures according to centers for disease control and prevention standards. Caregiver E was observed assisting multiple residents with feeding without performing hand hygiene between residents. Findings include: On 01/16/2024 at approximately 11:30 a.m., Surveyor observed lunch being served in the provider's dining room. Surveyor observed a table with 5 residents, who were identified by Caregiver C as requiring assistance with eating. On 01/16/2024 from approximately 11:42 to 11:50 a.m., Surveyor observed Caregiver E don the same pair of gloves while completing the following sequence of tasks: - Assist Resident 1 with his/her cup and straw. - Assist Resident 2 with his/her cup and straw. - Dish up a plate of food and serve. - Return to assist Resident 2 with his/her utensil. - Assist Resident 3 with his/her cup. "Multiple opportunities for hand hygiene may occur during a single care episode. Following are the clinical indications for hand hygiene: ...After touching a patient or the patient's immediate environment." (Source: Centers for Disease	N 441		

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N 441	Continued From page 11 Control and Prevention Website, Hand Hygiene in Healthcare Settings, January 8, 2021, https://www.cdc.gov/handhygiene/providers/index.html (retrieval date - January 16, 2024).) On 01/16/2024 at approximately 12:00 p.m., Surveyor interviewed Caregiver E regarding hand hygiene. When asked what the facility's expectation was regarding hand hygiene, Caregiver E replied, "Just wear gloves." Surveyor asked if it was acceptable to go from providing 1 resident with feeding assistance to another resident with feeding assistance without providing hand hygiene. Caregiver E stated it was okay and that the assistance needed to be provided. On 01/16/2024 at approximately 2:00 p.m., Surveyor reviewed concern with Executive Director A and Health and Wellness Director G that Caregiver E did not perform hand hygiene while assisting multiple residents with lunch. Both Executive Director A and Health and Wellness Director G wrote down Surveyor's concern.	N 441		