

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0017166	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 08/15/2023
NAME OF PROVIDER OR SUPPLIER PRAIRIE RIDGE ASSISTED LIVING MAYVILLE		STREET ADDRESS, CITY, STATE, ZIP CODE 1175 BRECKENRIDGE STREET MAYVILLE, WI 53050		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
N 000	Initial Comments On 08/14/2023, Surveyor conducted a complaint investigation and standard survey at Prairie Ridge Assisted Living Mayville. Complaint was unsubstantiated. two deficiencies were identified. Census 34	N 000		
N 219	83.17(1) Licensee conduct caregiver background check Caregiver background check. At the time of hire, employment or contract and every 4 years after, the licensee shall conduct and document a caregiver background check following the procedures in s. 50.065, Stats., and ch. DHS 12. A licensee shall not employ, contract with or permit a person to reside at the CBRF if the person has been convicted of the crimes or offenses, or has a governmental finding of misconduct, found in s. 50.065, Stats., and ch. DHS 12, Appendix A, unless the person has been approved under the department 's rehabilitation process as defined in ch. DHS 12. This Rule is not met as evidenced by: Based on record review and interview the provider did not have a background check completed for Caregiver A hired on 07/06/2023. Findings include: On 08/14/2023 at approximately 1:00 PM, Surveyor reviewed Caregiver A's facility file and	N 219		

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

TITLE

(X6) DATE

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N 219	Continued From page 1 noted there was not a background information disclosure, a Department of Justice background check, or an Integrated Background Information System check completed in the file. On 08/14/2023 at approximately 3:00 PM, Surveyor interviewed Administrator C. Administrator C confirmed s/he could not find a background check for Caregiver A.	N 219		
N 239	83.20(2)(a)-(d) Department-approved training courses. Standard Precautions. All employees who may be occupationally exposed to blood, body fluids or other moist body substances, including mucous membranes, non-intact skin, secretions, and excretions except sweat, whether or not they contain visible blood shall successfully complete training in standard precautions before the employee assumes any responsibilities that may expose the employee to such material. Fire safety. Within 90 days after starting employment, all employees shall successfully complete training in fire safety. First aid and choking. Within 90 days after starting employment, all employees shall successfully complete training in first aid and procedures to alleviate choking. Medication administration and management. Any employee who manages, administers or assists residents with prescribed or over-the-counter medications shall complete training in medication administration and management prior to assuming these job duties.	N 239		

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N 239	Continued From page 2 This Rule is not met as evidenced by: Based on record review observation and interview, the provider did not ensure 2 of 2 employees obtained all department approved training as required. Caregiver A did not have training in fire safety within 90 days after starting employment. Caregiver A and Caregiver B did not have training in first aid and choking within 90 days after starting employment. Caregiver A, who did not have an active certified nursing assistant license, who had responsibilities that would create exposure to blood, body fluids or other moist body substances, did not have training in standard precautions prior to assuming these duties. Findings include: On 08/14/2023, Surveyor conducted a review of 2 of 2 employees to verify compliance with department approved training requirements. Surveyor requested training records from Caregiver A and Caregiver B. Fire Safety On 08/14/2023 at approximately 3:00 PM, Surveyor interviewed Administrator C. Administrator C stated s/he was not sure why Caregiver A did not have their training completed, but they would have been hired under the previous administrator. Administrator C stated s/he would make sure these trainings were completed. Administrator C confirmed with Caregiver A s/he had not completed the trainings.	N 239		

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N 239	Continued From page 3 The record for Caregiver A, hired 07/06/2022, did not contain evidence of training or evidence of meeting an exemption for fire safety. On 08/14/2023, Surveyor verified staff identifier was not on the Community-Based Care and Treatment training registry for fire safety. First Aid and Choking On 08/14/2023 at approximately 3:00 PM, Surveyor interviewed Administrator C. Administrator C stated s/he was not sure why the two staff did not have their training completed, but they would have been hired under the previous administrator. Administrator C stated s/he would make sure these trainings were completed. Administrator C confirmed with Caregiver A and Caregiver B s/he had not completed the training. The record for Caregiver A, hired 07/06/2022 and Caregiver B hired 03/02/2022, did not contain evidence of training or evidence of meeting an exemption for first aid and choking. On 04/02/2020, Surveyor verified Caregiver A and Caregiver B were not on the Community-Based Care and Treatment training registry for first aid and choking. Standard Precautions On 08/14/2023 at 12:20 PM, Surveyor observed Caregiver A performing personal cares while working at the facility. The record for Caregiver A, hired 07/06/2022, did not contain evidence of training or evidence of meeting an exemption for standard precautions.	N 239		

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N 239	Continued From page 4 On 08/14/2023, Surveyor verified Caregiver A was not on the Community-Based Care and Treatment training registry for standard precautions. Administrator C was given the opportunity to submit any additional evidence of training by 08/15/2023. On 08/15/2023, Surveyor received an email from Administrator C stating no additional training records could be found for Caregiver A.	N 239		