STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	610269	A. BUILDING: _____ B. WING _____	04/29/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WELLS NATURE VIEW I	1016 S ADAMS AVE MARSHFIELD, WI 54449

(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 04/29/2025, Surveyor conducted an abbreviated survey at Wells Nature View 1. Additional information was gathered through 05/01/2025. As a result of the abbreviated survey, 3 deficiencies were identified. One deficiency was a repeat violation (see Statement of Deficiency 3O1D11, dated 09/28/2021). Census: 17	N 000		
N 223	83.18(1) Employee records maintained and current. A separate record for each employee shall be maintained, kept current, and at a minimum, include: (a) Written job description including duties, responsibilities and qualifications required for the employee; (b) Beginning date of employment; (c) Educational qualifications for administrators; (d) Completed caregiver background check following procedures under s. 50.065, Stats., and ch. HFS 12; (e) Documentation of training, or exemption verification. This Rule is not met as evidenced by: Based on interview and records review, the provider did not ensure documentation of completed department approved courses in fire safety, first aid/choking, and standard precautions for 1 of 2 sampled employees (Caregiver B). Findings include: The provider is licensed to care for up to 20 residents who may be/have irreversible	N 223		

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

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N 223	Continued From page 1 dementia/Alzheimer's, advanced aged, and terminally ill. On 04/29/2025 at 1:40 PM, Administrative Assistant A provided Surveyor with Caregiver B's complete record. S/he stated that Caregiver B is missing classes for the "registry items." S/he stated Caregiver B completed the courses when s/he was hired, but it "did not upload into registry." On 04/29/2025 at 1:45 PM, Surveyor reviewed Caregiver B's staff records to verify compliance with department approved training requirements. Caregiver B's records included a document containing evidence that s/he completed a department approved medication course on 09/03/2020. The record for Caregiver B, hired on 05/17/2023, did not contain evidence that Caregiver B completed training in fire safety, first aid/choking or standard precautions from a department approved source. The record also did not contain evidence of meeting an exemption for first aid and choking, fire safety, or standard precautions. On 05/01/2025 at 2:30 PM, Surveyor interviewed Administrative Assistant A. S/he acknowledged that Caregiver B's records did not contain documentation that s/he completed the department approved courses in fire safety, first aid/,choking, and standard precautions.	N 223		
N 499	83.45(3) Toxic substances. Toxic substances. The CBRF shall ensure that cleaning compounds, polishes, insecticides and toxic substances are labeled and stored in a secure area.	N 499		

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N 499	Continued From page 2	N 499		

This Rule is not met as evidenced by:
Based on observation and staff interview, the provider did not ensure cleaning compounds, polishes and toxic substances were securely stored.

Toxic substances were stored in an unlocked storage closet. This practice had the potential to affect 20 residents.

This is a repeat deficiency. See SOD # 3O1D11, dated 09/28/2021.

Findings Include:

The provider is licensed to care for up to 20 residents who may be/have irreversible dementia/Alzheimer's, advanced aged, and terminally ill.

On 04/29/2025 at 1:26 PM, during the environmental tour of the facility, Surveyor requested to see a storage closet next to the dining hall. Administrative Assistant A attempted to unlock the door with his/her key and realized the door handle did not contain a locking mechanism and acknowledged that the storage room had no means to be locked. Surveyor and Administrative Assistant A entered the storage room and observed a shelf located approximately four to five feet from the floor contained the following items:

-- Approximately 15 cans of Stainless Steel Cleaner and Polish which contained a Danger label on the front of the bottle which read in part, "HARMFUL OR FATAL IF SWALLOWED."
-- 2 bottles of Lime-A-Way cleaner
-- 5 bottles of Orange Power degreaser and

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N 499	Continued From page 3 cleaner -- 4 boxes of liquid ant bait Surveyor observed a large red bucket on the floor labeled "CORROSIVE LIQUID ....SODIUM HYDROXIDE ..." Administrative Assistant A acknowledged the aforementioned items in the storage room, that they were unlocked, and could be potentially hazardous to the residents. S/he stated, "these items should be in a locked area" and that the door handle would be replaced.	N 499		
N 507	83.46(1)(f) Combustibles. Combustible materials shall not be placed within 3 feet of any furnace, boiler, water heater, fireplace or other similar equipment. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure combustible materials were not placed within 3 feet of any furnace, boiler, water heater, fireplace or other similar equipment. Findings include: The provider is licensed to care for up to 20 residents who may be/have irreversible dementia/Alzheimer's, advanced aged, and terminally ill. On 04/29/2025 at approximately 1:20 PM, Surveyor toured the facility with Administrative Assistant A. While in the attic, Surveyor observed three furnaces and a hot water heater. The facility had Christmas decorations, boxes, an artificial Christmas tree, and an artificial decorative wreath	N 507		

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N 507	Continued From page 4 stored within 3 feet of all three furnaces and the hot water heater. Administrative Assistant A acknowledged that the aforementioned items were less than 3 feet away from the furnaces and hot water heater and stated s/he would have the items moved.	N 507		