

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 510043	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R-C 12/02/2024
NAME OF PROVIDER OR SUPPLIER PRAIRIE VIEW		STREET ADDRESS, CITY, STATE, ZIP CODE 6808 W CAMERON ST EAU CLAIRE, WI 54703		
(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 11/29/2024, Surveyor conducted a verification visit at Prairie View. Data collection continued through 12/02/2024. One deficiency was identified. This was a repeat violation. See Statement of Deficiency (SOD) 4OI411, dated 08/29/2023, and SOD 4OI412, dated 01/23/2024. Under statutory provisions of Wis. Stat. Ch. 50, a \$200 revisit fee is being assessed. Census: 7	{N 000}		
{N 481}	83.43(1) Environment safe, clean, and comfortable Environment. The CBRF shall provide a living environment that is safe, clean, comfortable, and homelike. All common dining and living areas shall contain furnishings appropriate to the intended use of the room. This Rule is not met as evidenced by: Based on observation, record review, and interview, the provider did not provide an environment that was safe, clean, comfortable, and homelike. This is a repeat deficiency. See Statement of Deficiency (SOD) 4OI411, dated 08/29/2023, and SOD 4OI412, dated 01/23/2024. Findings include: On 11/29/2024 at 10:14 AM, Surveyor interviewed	{N 481}		

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

TITLE

(X6) DATE

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{N 481}	Continued From page 1 Program Manager (PM) A. PM A stated s/he had been in his/her position for 1 month and remembered speaking to Regional Director (RD) C about still working on getting the windows replaced. PM A stated s/he would reach out to RD C for further documentation related to window replacement. Surveyor gave a deadline for the end of the day at 5:00 PM. On 11/29/2024 at 10:19 AM, Surveyor toured the facility with Assistant Program Manager (APM) B and observed the following: - Multiple light fixtures within the facility, including resident bedrooms, had dead bugs and grime in them. The upstairs landing light fixture also contained dead bugs. Multiple window screens in resident bedrooms had holes in them. Both bathroom ceiling vents and the vent above the stairs landing were dusty. - The downstairs laundry and bathroom had a window between the sink and toilet cracked in multiple areas. It appeared clear tape had been placed over the cracks. - Multiple windows in the older main part of the building upstairs and in the living and dining room areas would not stay open and were difficult to lock. A window in the living room had a gap between the panes. APM B stated s/he had planned to get plastic wrap for the windows. Resident 3's bedroom window had a tumbler cup holding the window up. Surveyor interviewed Resident 3 and s/he confirmed the window would not stay up on its own without the cup. Surveyor interviewed Resident 4 and s/he stated his/her bedroom windows would not stay open without the sticks s/he showed Surveyor located by his/her bed stand. Surveyor observed the dining	{N 481}		

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{N 481}	Continued From page 2 room windows. When opened the top panes slide down. It took both APM B and Surveyor to lock the window back in place once opened. At 10:36 AM, Resident 1 showed Surveyor his/her bedroom windows. The bedroom was shared with Resident 2. The window between their beds had a top pane that slid down and a box was used to keep the window propped open. Resident 1 used a paper towel roll to prop the window open at the end of his/her bed. On 11/29/2024 at 12:34 PM, Surveyor reviewed an email from RD C. RD C stated, "I am out of town for Thanksgiving with my family today. Would I be able to send you the documents by Monday morning?" On 11/29/2024 at 2:37 PM, Surveyor emailed RD C back and confirmed s/he could send documentation by Monday morning. On 12/02/2024, Surveyor did not receive further documentation related to windows from RD C. The provider had previously been granted an extension of the correction period through May 2024, to install new windows. On 11/29/2024, Surveyor discussed with RD D that the May 2024 had expired and there had not been an additional extension granted.	{N 481}		