Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016828	A. BUILDING: _____ B. WING _____	R-C 08/22/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VILLAS AT MAPLE RIDGE (THE)	819 ASH STREET SPOONER, WI 54801

(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 08/13/2024, Surveyor conducted a verification visit and complaint investigation at The Villas at Maple Ridge. Data was collected through 08/22/2024. One of 2 complaints was substantiated. Three violations were identified. Two of 3 violations were repeat deficiencies. See Statement of Deficiency (SOD) 7IFJ11, dated 08/08/2023. Under statutory provisions of Wis. Stat. ch. 50, a $200 revisit fee is being assessed. Census: 13.	{N 000}		
{N 302}	83.28(4)(a) Resident health screening and documentation Resident health screening. 1. Within 90 days before or 7 days after admission, a physician, physician assistant, clinical nurse practitioner or a licensed registered nurse shall screen each person admitted to the CBRF for clinically apparent communicable disease, including tuberculosis, and document the results of the screening. 2. Screening for tuberculosis and all immunizations shall be conducted using centers for disease control and prevention standards. 3. The CBRF shall maintain the screening documentation in each resident ' s record.	{N 302}		

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

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{N 302}	Continued From page 1 This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 4 residents were screened for clinically apparent communicable disease, including tuberculosis (TB). This is a repeat violation. See Statement of Deficiency (SOD) 7IFJ11, dated 08/08/2023. Findings include: The provider is licensed to care for 14 residents in the client groups irreversible dementia/Alzheimer's disease, advanced aged, and terminally ill. On 08/13/2024, Surveyor reviewed the records of Resident 1, admitted on 08/05/2024 and Resident 2, admitted on 05/15/2024. Resident 1 and Resident 2's record did not contain a screen for communicable disease, including TB. On 08/14/2024 at 4:05 PM, Surveyor received an email communication from Administrator A that read, "TB Tests: I was unable to locate proof for the two residents we were missing screens on [sic] yesterday. We faxed requests to their primary physicians asking them to send copies of TB tests, screening for communicable disease, and immunizations. We are still awaiting response." As of 08/19/2024, Surveyor had not received screens for communicable disease, including TB tests, for Resident 1 and 2. The provider did not ensure Resident 1 and Resident 2 were screened for communicable disease, including TB.	{N 302}		

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{N 389}	Continued From page 2	{N 389}		
{N 389}	83.35(3)(d) Service plans updated annually or on changes Individual service plan review. Annually or when there is a change in a resident ' s needs, abilities or physical or mental condition, the individual service plan shall be reviewed and revised based on the assessment under sub. (1). All reviews of the individual service plan shall include input from the resident or legal representative, case manager, resident care staff, and other service providers as appropriate. The resident or resident ' s legal representative shall sign the individual service plan, acknowledging their involvement in, understanding of and agreement with the individual service plan. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 3 of 4 residents had a completed annual individualized service plan (ISP). This is a repeat violation. See Statement of Deficiency (SOD) 7IFJ11, dated 08/08/2023. Findings include: The provider is licensed to care for 14 residents in the client groups irreversible dementia/Alzheimer's disease, advanced aged, and terminally ill. On 08/13/2024, Surveyor reviewed the record of Resident 3, 4, and 5. Resident 3 was admitted on 02/28/2023.	{N 389}		

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{N 389}	Continued From page 3 Resident 3's record included an ISP, updated on 07/16/2024, approximately 4 ½ months past the annual review date. Resident 4 was admitted on 04/23/2021. Resident 4's record included an ISP, updated on 06/12/2024, approximately 7 weeks past the annual review date. Resident 5 was admitted on 03/21/2019. Resident 5's record included an ISP updated on 04/07/2023, approximately 17 months past due. At approximately 4:40 PM, Surveyor interviewed Administrator A, who stated that prior to 08/13/2024, the 2 previous administrators, Former Administrator B and C, were responsible for annual ISP updates. Administrator A stated that from now on, the assisted living nurses would be responsible for ISP updates. The provider did not ensure Resident 3, 4, and 5's ISPs were updated annually.	{N 389}		
N 496	83.45(1)(e) Electrical, mechanical, water supply Systems. The CBRF shall maintain all electrical, mechanical, water supply, plumbing, fire protection and sewage disposal systems in a safe and functioning condition. This Rule is not met as evidenced by: Based on observation, record review, and interview, the provider did not ensure the water supply system was maintained in a safe and functioning condition. Findings include:	N 496		

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N 496	Continued From page 4 The provider is licensed to care for 14 residents in the client groups irreversible dementia/Alzheimer's disease, advanced aged, and terminally ill. On 06/17/2024, the Department received a complaint related to hot water temperatures. On 08/13/2024 at 1:06 PM, Surveyor interviewed Caregiver D, who stated that the hot water was a problem and that it takes forever to get warm. Caregiver D stated there were 2 resident bathing rooms and sometimes if they turned on the water in 1 of the bathrooms, the other bathroom's water would warm up faster. Caregiver D stated the bathroom sink can take up to 30 minutes to warm up and there were days when the water never got warm. Caregiver D stated the water warms up faster on the weekends because the laundry facility is not in use. Caregiver D confirmed the residents used the sink and toilets in their private rooms, and some used their showers. Caregiver D stated Resident 6 would turn his/her hot water on and go back to bed for 30 minutes because it would warm up by the time s/he rose for the day. Caregiver D stated Former Administrator (FE) B was aware of the hot water issues and maintenance had been informed but the water was still not fixed. Caregiver D stated that when staff needed to wash dishes, they would boil water but now were directed to send all the dirty dishes to the attached nursing home. Caregiver D stated the staff do not take water temperatures. At 1:45 PM, Surveyor interviewed Administrator A, who stated Maintenance E had not been taking hot water temperatures. Surveyor left the bathroom sink hot water running and took the temperatures 4 times in room 203:	N 496		

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N 496	Continued From page 5	N 496		

-1:33 PM the temperature was 80 degrees Fahrenheit
-1:36 PM the temperature was 82 degrees Fahrenheit
-1:38 PM the temperature was 84 degrees Fahrenheit
-1:40 PM the temperature was 85 degrees Fahrenheit.

At 1:42 PM, Surveyor took a temperature at the kitchen sink:
-82 degrees Fahrenheit.

At 2:24 PM, Surveyor interviewed Resident 4 who stated that getting hot water in his/her room varied, that sometimes the hot water came right away, and Sundays were never an issue.

Surveyor left the bathroom sink hot water running and took the temperature in Resident 4's room:
-2:27 PM the temperature was 100 degrees Fahrenheit
-2:37 PM the temperature was 102 degrees Fahrenheit.

Surveyor reviewed a document titled LOGBOOK REPORT that included completed hot water temperature checks. The last hot water check was dated 03/02/2024 and ranged from 108 to 113 degrees Fahrenheit.

At 2:41 PM, Surveyor interviewed Administrator A, who stated Regional Director of Operations (RDO) F had spoken with Maintenance E to have the boiler serviced.

Surveyor left the common hand washing sink running:
-3:42 PM the temperature was 78 degrees Fahrenheit

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N 496	Continued From page 6 -3:47 PM the temperature was 98 degrees Fahrenheit. The provider did not ensure the water supply system was maintained in a safe and functioning condition.	N 496		