STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0019882	A. BUILDING: _____ B. WING _____	01/21/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LAKEHOUSE NEW HOLSTEIN	1706 HOOVER ST NEW HOLSTEIN, WI 53061

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N 000	Initial Comments On 01/16/2025, with information gathered through 01/21/2025, Surveyor conducted a probationary survey at Lakehouse New Holstein. As a result of the survey, 4 deficiencies will be issued. Census: 20	N 000		
N 220	83.17(2)(a) Employees screened for communicable disease. The CBRF shall obtain documentation from a physician, physician assistant, clinical nurse practitioner or a licensed registered nurse indicating all employees have been screened for clinically apparent communicable disease including tuberculosis. Screening for tuberculosis shall be conducted using centers for disease control and prevention standards. The screening and documentation shall be completed within 90 days before the start of employment. The CBRF shall keep screening documentation confidential, except the department shall have access to the screening documentation for verification purposes. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 2 (Housekeeper B and Caregiver C) employees had been screened for clinically apparent communicable disease including tuberculosis (TB) within 90 days before the start of employment. Housekeeper B was hired on 07/16/2024. Housekeeper B's employee record did not contain documentation s/he was screened for	N 220		

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

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N 220	Continued From page 1 communicable disease and TB. Caregiver C was hired on 07/09/2024. Caregiver C's employee record did not contain documentation s/he was screened for communicable disease and TB. Findings Include: On 01/16/2025, Surveyor reviewed Housekeeper B and Caregiver C's employee files. Housekeeper B was hired on 07/16/2024 and Caregiver C was hired on 07/09/2024. Houskeeper B and Caregiver C's employee files did not contain documentation they had been screened for communicable disease and received a TB test 90 days before the start of employment. On 01/16/2025 at approximately 11:30AM, Surveyor interviewed Executive Director A. Executive Director A confirmed Housekeeper B and Caregiver C did not have the communicable disease screen and the TB test administered 90 days prior to the start of employment.	N 220		
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	N 239		

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N 239	Continued From page 2 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. This Rule is not met as evidenced by: Based on source interview and record review, the provider did not ensure 1 of 2 (Housekeeper B) employees obtained all department approved training as required. Housekeeper B did not have training in fire safety within 90 days after starting employment. Findings include: On 01/16/2025, Surveyor conducted a review of employees to verify compliance with department approved training requirements. Surveyor requested training records from Executive Director A for Housekeeper B. The record for Housekeeper B, hired 07/16/2024, did not contain evidence of training or evidence of meeting an exemption for fire safety. On 01/16/2024, at approximately 1:00PM, Surveyor interviewed Executive Director A. Executive Director A confirmed the provider did	N 239		

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N 239	Continued From page 3 not have evidence Housekeeper B completed or met an exemption for fire safety training. On 01/16/2025, Surveyor verified Housekeeper B was not on the Community-Based Care and Treatment training registry for fire safety.	N 239		
N 393	83.35(5)(a) Initial evaluation of evacuation limitations. Initial evaluation. The CBRF shall evaluate each resident within 3 days of the resident ' s admission to determine whether the resident is able to evacuate the CBRF within 2 minutes in an unsprinklered CBRF and 4 minutes in a sprinklered CBRF without any help or verbal or physical prompting, and what type of limitations that resident may have that prevent the resident from evacuating the CBRF within the applicable period of time. A form provided by the department shall be used for the evaluation. The resident ' s evaluation shall be retained in the resident ' s record. This Rule is not met as evidenced by: Based on record review and interview, the provider did not evaluate 1 of 2 (Resident 1) residents within 3 days of the resident's admission to determine whether the resident is able to evacuate the CBRF within 2 minutes in an unsprinklered CBRF and 4 minutes in a sprinklered CBRF without any help or verbal or physical prompting, and what type of limitations that resident may have that prevent the resident from evacuating the CBRF within the applicable period of time. Resident 1 was admitted on 12/13/2024.	N 393		

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N 393	Continued From page 4 Resident 1's record did not contain an evacuation evaluation. Findings Include: The CBRF is licensed as a Class CNA (nonambulatory) facility with the ability to serve up to 50 residents who are physically disabled, advanced aged and/or have irreversible dementia/Alzheimer's disease. Surveyor reviewed Resident 1's record. Resident 1 was admitted to the facility on 12/13/2024. Resident 1's record did not contain an evacuation evaluation. On 01/16/2025 at 1:00PM, Surveyor interviewed Executive Director A. Executive Director A stated Resident 1 just moved in and therefore did not have an evaluation completed yet. Executive Director A acknowledged the evaluation needed to be done within 3 days of admission.	N 393		
Z 012	50.065(2)(bm) OUT OF STATE BACKGROUND CHECKS If the person who is the subject of the search under par. (am) or (b) is not a resident of this state or if at any time within the 3 years preceding the date of the search that person has not been a resident of this state, or if the department or entity determines that the person's employment, licensing, or state court records provide a reasonable basis for further investigation, the department or the entity shall make a good faith effort to obtain from any state or other United States jurisdiction in which the person is a resident or was a resident within the 3 years	Z 012		

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Z 012	Continued From page 5 preceding the date of the search information that is equivalent to the information specified in par. (am) 1. or (b) 1. The department or entity may require the person to be fingerprinted on 2 fingerprint cards, each bearing a complete set of the person's fingerprints. The department of justice may provide for the submission of the fingerprint cards to the federal bureau of investigation for the purposes of verifying the identity of the person fingerprinted and obtaining the records of his or her criminal arrests and convictions. This Rule is not met as evidenced by: Based on interview and record review, the provider did not ensure an out of state background check was completed at the time of hire for 1 of 1 (Housekeeper B) employees reviewed. Housekeeper B completed a Background Information Disclosure (BID) which indicated s/he lived in South Carolina within the last three years. Housekeeper B's employee record did not contain an out of state background check. Findings include: On 01/16/2025, Surveyor conducted an employee records review. A sample of employees was selected, including the record of Housekeeper B. Housekeeper B had a hire date of 07/16/2024. Housekeeper B completed a BID, which indicated s/he lived in South Carolina within the last three years. The Department of Justice (DOJ) and Integrated Background Information System (IBIS)	Z 012		

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Z 012	Continued From page 6 background check information report was completed. On 01/16/2025 at approximately 11:30AM, Surveyor interviewed Executive Director A. Executive Director A stated s/he was under the impression the DOJ report was a national search therefore it included all 50 states. Surveyor informed Executive Director A the DOJ report was for the state of Wisconsin only and the facility was responsible for contacting the state of South Carolina. Executive Director A stated s/he was not aware of this. Executive Director A stated recently there was a company wide change to the background checks and they are conducting a national background search on new employees. Executive Director A stated s/he would have Human Resources run the national background search on Housekeeper B immediately.	Z 012		