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
	510042	A. BUILDING: _____ B. WING _____	R-C 08/15/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LIBERTY VIEW	611 MAIN ST EAU CLAIRE, WI 54701

(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 08/15/2023, Surveyor conducted a verification visit at Liberty View. Three of 4 deficiencies identified in Statement of Deficiency (SOD) DYM211, dated 04/04/2023 were corrected. One deficiency was identified and was a repeat deficiency (see SOD DYM211, dated 04/04/2023). Under statutory provisions of Wis. Stat. ch. 50, a $200 revisit fee is being assessed. Census: 5	{N 000}		
{N 491}	83.44(2)(c) Interior floors, walls and ceilings. Every interior floor, wall and ceiling shall be clean and in good repair. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure interior walls and ceilings were in good repair. This is a repeat deficiency. See Statement of Deficiency (SOD) DYM211, dated 04/04/2023. Findings include: On 08/15/2023 at 11:50 AM, Surveyor toured the facility with Assistant Program Manager (APM) A and observed the following: -Radiators throughout the facility had peeling paint. APM A stated Program Manager (PM) B was working on painting the radiators but had not	{N 491}		

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

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{N 491}	Continued From page 1 finished. Resident 1's radiator was not painted yet and stated, "[PM B] was going to paint it but I don't know when. I don't like the smell of that stuff." APM A stated PM B was using spray paint. APM A asked Resident 1 if s/he would allow his/her radiator to be painted if they opened the windows. Resident 1 stated s/he did not want his/her windows open because s/he did not like the smell of smoke from the residents outside his/her window. APM A stated they could have the residents who smoke go to an alternate area. -Resident 1's door was scraped and had peeling paint. The upstairs door frames were chipped with peeling paint. The hallway in the entryway had spackle and the baseboards had a brownish tint to them. -The wall in the living room had peeling paint. - There was a hole in the wall at the top of the stairs above the handrail. APM A stated s/he was not sure how long the hole had been there and stated, "Probably a while." -An area on the wall in the stairwell was spackled from the floor to the ceiling but not painted. -The ceiling over the dining room table had a large area of paint peeled off and the paint was hanging down, not adhered to the ceiling. APM A stated, "We haven't gotten to fixing that yet because we don't have a ladder tall enough to reach it. The company told us we (the staff) have to paint the house so it's a process, that's why you see half of our cupboard doors outside because we have to sand them down and re-paint them." APM A stated there was water damage that occurred several years ago from the bathroom upstairs.	{N 491}		

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{N 491}	Continued From page 2 The provider did not ensure interior walls and ceilings were in good repair.	{N 491}		