STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017957	A. BUILDING: _____ B. WING _____	C 10/03/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SHERWOOD LODGE ASSISTED LIVING	116 CHERRY ST WILLIAMS BAY, WI 53191

(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
U 000	INITIAL COMMENTS On 10/03/2024, Surveyor conducted an abbreviated survey and 1 complaint investigation at Sherwood Lodge Assisted Living. One deficiency was identified. The complaint was unsubstantiated. Census: 36	U 000		
U 268	89.34(17) TENANT RIGHTS Rights of tenants. A tenant of a residential care apartment complex shall have all the rights listed in this section. These rights in no way limit or restrict any other rights of the individual under the U.S. Constitution, civil rights legislation or any other applicable statute, rule or regulation. Tenant rights are all of the following: (17) SAFE ENVIRONMENT. To a safe environment in which to live. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure the tenant's right to safe environment when staff did not follow Center of Disease Control (CDC) recommendations for standard precautions. Personal Care Aid D did not wash or sanitize his/her hands during medication administration. Findings include: In October 2002, the CDC published the	U 268		

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

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U 268	Continued From page 1	U 268		

"Guideline for Hand Hygiene in Healthcare Settings." This guideline sets the standard for caregivers regarding glove use and hand washing to prevent the spread of infections. The CDC has recommended that caregivers wash their hands before having direct contact with residents, after contact with a resident's intact skin, after contact with body fluids or excretions, if moving from a contaminated-body site to a clean-body site during cares, after contact with inanimate objects and after removing gloves.

On 10/03/2024 from 11:23 AM to 11:39 AM, Surveyor observed Personal Care Aid (PCA) D administer medications.

At 11:23 AM, PCA-D checked Resident 1's blood pressure. PCA-D documented the blood pressure on the laptop.

PCA-D donned gloves to check Resident 2's blood sugar, unlocked the medication cart with keys, retrieved the glucometer from the medication cart, stated s/he had no strips and would check Resident 2's blood sugar later.

Wearing the same gloves, PCA-D retrieved 2 bottles of eye drops from the medication cart, locked the medication cart, documented on the laptop, touched Resident 3's the door handle, and administered Resident 3's eye drops. PCA-D removed the gloves and documented administration of eye drops on the laptop.

PCA-D unlocked the medication cart with keys, retrieved Resident 4's medication from the medication cart, prepped the medication and documented on the laptop. PCA-D locked the medication cart, touched Resident 4's door handle and administered the medication. PCA-D

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U 268	Continued From page 2	U 268		

picked up a bowl containing garbage and disposed of the garbage in Resident 3's garbage can. PCA-D documented administration of Resident 4's medication on the laptop.

PCA-D unlocked the medication cart with keys, retrieved Resident 5's medication from the medication cart, prepped the medication and documented on the laptop. PCA-D locked the medication cart, touched Resident 5's door handle, administered the medication and documented on the laptop.

On 10/03/2024 at 11:39 AM, Surveyor interviewed PCA-D who stated s/he forgot to wash and/or sanitize his/her hands after removing gloves and between each resident's medication pass.

On 10/03/2024, Surveyor reviewed the facility's Hand Hygiene policy dated 11/02/2022 which stated " ...All staff will perform proper hand hygiene procedures to prevent the spread of infection to other personnel, residents, and visitors ...The use of gloves does not replace hand hygiene. If your task requires gloves, perform hand hygiene prior to donning gloves, and immediately after removing gloves ..." The Hand Hygiene Table included in the policy identified hands should be washed with soap and water or sanitized before applying and after removing gloves and before preparing or handling medications.

On 10/03/2024 at 2:50 PM, Surveyor discussed concern of not following CDC recommendations for glove use and handwashing with Executive Director A and Business Office Manager B. Executive Director A stated staff were expected to wash or sanitize hands between each resident's medication pass.

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U 268	Continued From page 3 On 10/03/2024 at 8:56 PM, Surveyor received an email from Executive Director A stating " ...I would also like you to know that I reeducated [PCA-D] on the importance of hand hygiene as well as provided [him/her] a copy of the policy ..."	U 268		