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| N 000 | Initial Comments<br><br>On 06/12/2023, Surveyor conducted 3 complaint investigations at Cedar Ridge Elder Service IV. Information was reviewed through 06/23/2023.<br><br>Four deficiencies were identified.<br><br>All three complaints were substantiated.<br><br>Census: 12 | N 000 | | |
| N 239 | 83.20(2)(a)-(d) Department-approved training courses.<br><br>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.<br>Fire safety. Within 90 days after starting employment, all employees shall successfully complete training in fire safety.<br>First aid and choking. Within 90 days after starting employment, all employees shall successfully complete training in first aid and procedures to alleviate choking.<br>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. | N 239 | | |

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

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| N 239 | Continued From page 1<br><br>This Rule is not met as evidenced by:<br>Based on record review and interview, the provider did not ensure 1 of 4 sampled employees obtained all department approved training as required.<br><br>The provider did not have evidence of Caregiver D receiving training in first aid and choking within 90 days after starting employment.<br><br>Findings include:<br><br>On 06/12/2023, Surveyor conducted a review of 4 employee records to verify compliance with department approved training requirements. Surveyor requested training records from House Manager B for Caregiver C, D, E, and F. Surveyor stated evidence of meeting the training requirements could include a CBRF training certificate obtained prior to 2009, evidence the caregiver is currently on the CBRF training registry, or evidence of meeting an exemption for the training requirement.<br><br>The record for Caregiver D, hired 01/24/2023, did not contain evidence of the department approved training or evidence of meeting an exemption for first aid and choking. On 6/13/2023 at 3:01 PM, House Manager D confirmed s/he was unable to locate any certificate that Caregiver D had received the training and Caregiver D was not on the CBRF training registry for first aid and choking. On 6/15/2023 at 2:52 PM, Surveyor interviewed Administrator A. Administrator A stated this would be rectified immediately. | N 239 | | |
| N 417 | 83.37(3)(a) Medication storage: original containers. | N 417 | | |

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| N 417 | Continued From page 2<br><br>Original containers. The CBRF shall keep medications in the original containers and not transfer medications to another container, unless the CBRF complies with all of the following: 1. Transfer of medications from the original container to another container shall be done by a practitioner, registered nurse, or pharmacist. Transfer of medication to another container may be delegated to other personnel by a practitioner, registered nurse or pharmacist. 2. If a medication is administered by CBRF employees and the medication is transferred from the original container by a registered nurse, or practitioner or other personnel who were delegated the task, the CBRF shall have a legible label on the new container that includes, at a minimum, the resident ' s name, medication name, dose and instructions for use. The CBRF shall maintain the original pharmacy container until the transferred medication is gone.<br><br>This Rule is not met as evidenced by:<br>Based on observation, record review and interview, the provider did not ensure that medications were kept in the original containers and not transferred into another container unless the original pharmacy container and label was kept. This was discovered for 2 of 12 residents. Resident 2 and Resident 3 had unit dose cards made by the management staff at the facility with handwritten labels.<br><br>Findings include:<br><br>On 6/12/2023 at 3:53 PM, Surveyor observed as Caregiver E gave Resident 3 a medication from a unit-dose card that had a handwritten label. Resident 3 had 3 medication cards that Caregiver E indicated had been repackaged by | N 417 | | |

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| N 417 | Continued From page 3<br>management. The medications were 4 tablets of sertraline 50 milligrams (mg), 8 tablets of metoprolol tartrate 100 mg, and 8 tablets of simvastatin 40 mg.<br><br>Caregiver E went through the the unit dose medication cards for all 12 residents in the general cart and the secured compartment. There was one handwritten card for Resident 2. The card had one tablet in it, identified as a hydrocodone/acetaminophen tablet 5 mg/325 mg.<br><br>Caregiver E stated s/he did not know why the medications were repackaged and thought Administrator A and House Manager B had done so.<br><br>On 06/12/2023 at 2:30 PM, Surveyor interviewed Administrator A and House Manager B. Administrator A stated that repackaging medications had been delegated to the management team by the corporate nurse but did not recall why the repackaging was done. Administrator A stated s/he would search for the paperwork regarding this repackaging.<br><br>On 06/15/2023 at 2:52 PM, Surveyor interviewed Administrator A. Administrator A was advised of the need to keep the original container with the original label.<br><br>On 06/23/20223 House Manager G submitted copies of delegation certifications for this task by Registered Nurse H but no paperwork recording the reason for repackaging of medications for Resident 1 and Resident 2. | N 417 | | |
| N 423 | 83.37(3)(g) Medication storage: controlled substances. | N 423 | | |

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| N 423 | Continued From page 4<br><br>Controlled substances. The CBRF shall provide separately locked and securely fastened boxes or drawers or permanently fixed compartments within the locked medications area for storage of schedule II drugs subject to 21 USC 812 (c), and Wisconsin ' s uniform controlled substances act, ch. 961, Stats.<br><br>This Rule is not met as evidenced by:<br>Based on observation, record review and interview, the provider did not ensure that controlled medications were secured, double locked and permanently affixed.<br><br>On 04/18/2023 and 05/03/2023, the department received 2 complaints alleging the medication cart had been found unlocked.<br><br>Findings include:<br><br>On 06/12/2023 at 9:08 AM, Surveyor observed the medication cart in the kitchen. It was unlocked. The kitchen is designed with open with a wide walk-through from the dining room and a doorway to the hall. The cart was found against the back wall next to the door to the hall. There was no lock on the cart to permanently affix the cart to the wall or the floor. Surveyor observed Caregiver C clear a table and pick up a bottle of Artificial Tears eye drops. The eye drops were prescribed for Resident 1. Caregiver C placed the bottle on the cart. Caregiver C stated s/he was not trained as a medication passer and Caregiver E was assigned that task today.<br><br>At 9:15 AM, Surveyor observed the cart was still unlocked and the eye drops were still on the cart. | N 423 | | |

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| N 423 | Continued From page 5<br>At 9:59 AM, Surveyor observed the cart locked and the eye drops were not on the cart.<br><br>At 1:48 PM, Surveyor interviewed Caregiver F. Caregiver F stated the cart must be always locked and stated, "I probably forgot to lock it."<br><br>At 3:53 PM, Surveyor observed a medication pass and interviewed Caregiver E. Caregiver E stated the keys were kept only by the medication passer and the cart had always be locked. The cart contained all the medications for all the residents. In the cart was a separately locked compartment for Schedule II drugs. It contained 30 oral syringes of morphine sulfate and 1 tablet of hydrocodone and acetaminophen.<br><br>The medication cart contained schedule II drugs and was left in an unsecured area. The cart was not permanently affixed. The cart was left unattended and unlocked on at least 2 occasions. A prescribed eye drop was left out in the dining room. | N 423 | | |
| N 448 | 83.41(2)(a) Nutrition: diet.<br><br>Diets. 1. The CBRF shall provide each resident with palatable food that meets the recommended dietary allowance based on current dietary guidelines for Americans and any special dietary needs of each resident. 2. The CBRF shall provide a therapeutic diet as ordered by a resident ' s physician.<br><br>This Rule is not met as evidenced by:<br>Based on observation, record review and | N 448 | | |

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| N 448 | Continued From page 6<br>interview, the provider did not follow a menu based on current dietary standards. The provider had changed procedures to address previous issues of food not being available for the planned meals and the substitutions not being nutritionally balanced for the residents. The change to ensure planned and nutritionally balanced meals for the residents did not happen on the day of survey.<br><br>On 06/05/2023, the department received a complaint about food purchases and availability.<br><br>Findings include:<br><br>The current dietary guideline for Americans has a "...Focus on meeting food group needs with nutrient-dense foods and beverages and stay within calorie limits. An underlying premise of the Dietary Guidelines is that nutritional needs should be met primarily from foods and beverages-specifically, nutrient-dense foods and beverages. Nutrient-dense foods provide vitamins, minerals, and other health-promoting components and have no or little added sugars, saturated fat, and sodium. A healthy dietary pattern consists of nutrient-dense forms of foods and beverages across all food groups, in recommended amounts, and within calorie limits. The core elements that make up a healthy dietary pattern include:<br><br>~ Vegetables of all types-dark green; red and orange; beans, peas, and lentils; starchy; and other vegetables<br>~ Fruits, especially whole fruit o Grains, at least half of which are whole grain<br>~ Dairy, including fat-free or low-fat milk, yogurt, and cheese, and/or lactose-free versions and fortified soy beverages and yogurt as alternatives<br>~ Protein foods, including lean meats, poultry, | N 448 | | |

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| N 448 | Continued From page 7 | N 448 | | |

and eggs; seafood; beans, peas, and lentils; and nuts, seeds, and soy products o Oils, including vegetable oils and oils in food, such as seafood and nuts. Consuming enough protein is important to prevent the loss of lean muscle mass that occurs naturally with age .... Monitoring protein intake is especially important as older adults transition through this life stage. Intake patterns show average intakes of protein foods is lower for individuals ages 71 and older compared to adults ages 60 through 70. About 50 percent of women and 30 percent of men 71 and older fall short of protein foods recommendations." (Source: The U. S. Department of Agriculture (USDA) and U.S. Department of Health and Human Services' publication, Dietary Guidelines for Americans 2020 - 2025, 9th edition. December 2020, available at https:www.DietaryGuidelines.gov (retrieval date 06/21/2023).)

The USDA replaced the food pyramid in 2011 with "MyPlate." This dietary recommendation divides a plate into four groups of food. A plate of food should have ¼ vegetables, ¼ fruit, ¼ whole grains, and ¼ protein, and one glass of dairy. The goal being that ½ of the plate is fruits and vegetables. (Source USDA website, https:www.myplate.gov (retrieval date 06/21/2023).)

On 06/12/2023 at 9:10 AM, Surveyor observed leftover pancakes on a baking sheet on top of the stove. The whiteboard in the hall stated, "Easy Breakfast Casserole" and toast was on the menu for breakfast, beef roast and mashed potatoes for lunch and "sloppy joes" for supper. Surveyor interviewed Caregiver C. Caregiver C stated breakfast had been only pancakes because Caregiver D told the day shift staff there was nothing to make the breakfast casserole as there

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was no eggs or breakfast meat. Caregiver C stated breakfast service was started at 7:00 AM and there was no meat/protein, fruit, or vegetable, just the pancakes that Caregiver D made. Breakfast was served to each resident as they came into the dining room. Surveyor looked in the refrigerators and freezers in the kitchen and there were no eggs, bacon, or sausage.

On 06/12/2023, Surveyor interviewed 4 residents and 7 staff members about the food and food service.
Resident interviews:

At 10:30 AM, Surveyor interviewed Resident 3 about the quality of the food. Resident 3 stated it was not the best because the staff did not have the time to prepare a meal and they just threw together a sandwich and the sandwich was usually just one slice of lunch meat and one slice of cheese. Resident 3 stated that not that long ago, probably no more than 2 weeks prior, they were served lunch meat sandwiches for lunch and supper on the same day.

At 11:00 AM, Surveyor interviewed Resident 1 and Resident 4. Both residents preferred to be interviewed at the same time with each resident agreeing on the answers to any questions. When asked about the food and food service, both residents stated food was not being brought in and the residents were eating too many sandwiches. The residents stated they never knew what was going to be served. The residents stated they were told the provider had run out of eggs, milk, and other staples. The residents stated that a cold meat sandwich with American cheese on bread, with a side of potato chips, was served the night before (The menu stated a ham sandwich, macaroni salad and pickles were to be

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| N 448 | Continued From page 9<br>served). The resident stated that within the last 2 months, there was a day they were served cold meat sandwiches and potato chips for both lunch and supper.<br><br>At 2:00 PM, Surveyor interviewed Resident 5 about the food and food service. Resident 5 stated the food could be better but s/he enjoyed the beef roast in gravy and mashed potatoes served at lunch. Resident 5 stated residents did not know what was supposed to be served as the staff was not writing it on the board.<br><br>Staff Interviews:<br><br>At 1:30 PM, Surveyor interviewed Caregiver C. Caregiver C stated menu substitutions happened 1 to 2 times a week. Caregiver C stated staff are to notify House Manager B or go to the store if something is missing, or staff just go with what is on hand. Caregiver C stated that not enough food is being ordered and they run out of food. Caregiver C stated sandwiches are served once a week when there is "slim pickings." Caregiver C recalled that the last time groceries were bought, there were 22 bags that had to be put away.<br><br>At 1:48 PM, Surveyor interviewed Caregiver F about food service for the residents. Caregiver F confirmed that Caregiver D told the day shift there were no eggs or meat for breakfast. Caregiver F stated the procedure to get groceries had changed and they were now being bought at the grocery store and delivered. Caregiver F stated there are substitutions being made about 2 to 3 times a week. Caregiver F stated that running out of chips, graham crackers, and other snack items is usually the problem, and the staff serve whatever is on hand. | N 448 | | |

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| N 448 | Continued From page 10<br><br>At 4:15 PM, Surveyor interviewed Caregiver I. Caregiver I stated that the residents were served a lot of sandwiches and a lot of times the menu written on the board turned into "kinda fend for yourself." Caregiver I stated there were no menus when s/he started in February but in early May they started to get a menu.<br><br>At 4:31 PM, Surveyor interviewed Caregiver E. Caregiver E stated there are substitutions a couple of times a week on the evening shift. Caregiver E stated s/he recalled one week having sandwiches 2 to 3 days in a row and about 2 to 3 weeks prior, the residents were served cold meat sandwiches for lunch and supper. Caregiver E stated the day shift served sandwiches for lunch and never told the next shift, so sandwiches were served for lunch and supper the same day.<br><br>On 06/13/2023 at 10:00 AM, Surveyor interviewed Caregiver D. Caregiver D stated there was nothing to make for breakfast. Caregiver D stated there were no eggs, no meat, and no hashbrowns to make the breakfast casserole. Caregiver D stated s/he used what s/he had. Caregiver D stated there were 3 choices; pancakes, waffles, and cereal and s/he chose pancakes. When asked how often substitutions happened, Caregiver D stated, "A lot." Caregiver D stated that not having the right food on hand did not happen when s/he was writing his/her own menu. Caregiver D stated that for the last 1 to 1½ months, there had been a pre-printed menu from the new owners. Prior to that, Caregiver D ordered from a large wholesale company and wrote up the menu using his/her experience working in restaurants. Caregiver D stated an example was the breakfast the day before and the beef roast served for lunch the day before. Caregiver D stated s/he went to the store and | N 448 | | |

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purchased the beef roast the day before. Caregiver D stated s/he did not know until last week that s/he could submit a receipt for repayment but did not do so. When asked if sandwiches had been used as a substitution for a meal, Caregiver D stated they were, as about ½ of the food in the freezers had been thrown out about 3 to 4 weeks ago. Caregiver D stated there was a new procedure for management to shop at grocery stores, but the last time it was done there was 150 cans of food bought but no meat. Caregiver C stated the menus were not changed to reflect menu substitutions, so it was not known how often sandwiches were served. Caregiver D stated this happens a lot on the evening shift and within the last 2 weeks, lunch meat sandwiches were served twice in one day. Caregiver D stated that last week there was a staff meeting about the menus and substitutions. Caregiver D was told management would shop off the menu and that s/he needed to message management about the ingredients that were missing. Caregiver D stated there was no beef roast and no "Manwich" for the sloppy joes the day before. Caregiver D stated s/he did not discover this until 1:00 AM when s/he was going to prepare the meals for the day. Caregiver D stated s/he had to go to the store yesterday morning to get them.

On 06/12/2023, Surveyor interviewed Administrator A and House Manager B. They stated that last Wednesday there was a meeting to remind staff about the new procedure to order food, the need to keep track of substitutions, and the need for staff to talk to management before ordering. The new procedure was implemented as the past management company could not meet the food budget. The staff stated that the house manager was now in charge of shopping. They stated that the last shopping order for Friday

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| N 448 | Continued From page 12<br>did not get done because there were 2 call-ins and management had to work the floor.<br><br>On 06/15/2023, Surveyor reviewed the menus since 4/30/2023 for the times a cold meat sandwich and chips were served or were part of the planned menu. Cold meat sandwiches were not on the menu for any meal except a ham sandwich and pasta salad on 6/11/2023.<br><br>The provider had a history of serving nutritionally unbalanced meals due to not having the ingredients on hand and putting together a meal of a cold meat sandwich and chips. The provider had a history of not letting the residents know what was on the menu or if there needed to be a substitution. The provider changed the process to get groceries and educated staff on these changes in an attempt to ensure balanced meals for the residents. However, on the day of survey, the food was not purchased ahead for the meal menus, there were no ingredients to make the meal as planned on the menu, staff had to purchase the meat to be served at the grocery store with their own funds, and the menu was not updated to show the change in the menu. The last-minute substitution was not nutritionally comparable to the planned meal for breakfast. | N 448 | | |