

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0014024	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R-C 10/08/2024
NAME OF PROVIDER OR SUPPLIER CENTURY RIDGE OF GREEN BAY II		STREET ADDRESS, CITY, STATE, ZIP CODE 2510 BLUESTONE PL GREEN BAY, WI 54311		
(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 10/08/2024, Surveyors conducted a verification visit at Century Ridge of Green Bay II. As a result of the verification visit, 4 of 7 deficiencies remain uncorrected, and one new deficiency was identified. Under statutory provisions of Wis. Stat. Ch. 50, a \$200 revisit fee is being assessed. Census: 14	{N 000}		
{N 230}	83.19 Orientation Before an employee performs any job duties, the CBRF shall provide each employee with orientation training which shall include all of the following: (1) Job responsibilities; (2) Prevention and reporting of resident abuse, neglect and misappropriation of resident property; (3) Information regarding assessed needs and individual services for each resident for whom the employee is responsible; (4) Emergency and disaster plan and evacuation procedures under s. HFS 83.47(2); (5) CBRF policies and procedures; (6) Recognizing and responding to resident changes of condition. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure one (1) of 3 employees reviewed, obtained orientation training prior to performing work duties which includes: (1) Job responsibilities; (2) Prevention and reporting of resident abuse, neglect and misappropriation of resident property; (3) Information regarding assessed needs and individual services for each	{N 230}		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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{N 230}	Continued From page 1 resident for whom the employee is responsible; (4) Emergency and disaster plan and evacuation procedures; (5) CBRF policies and procedures; (6) Recognizing and responding to resident changes of condition. Caregiver B did not have training in information regarding assessed needs and individual services for each resident for whom the employee is responsible. Caregiver B did not have training in emergency and disaster plan and evacuation procedures. Caregiver B did not have training in recognizing and responding to resident changes of condition. This is a repeat violation. See Statement of Deficiency (SOD) YL3J11, dated 01/29/2024. Findings include: On 10/08/2024, Surveyor conducted a review of 3 employees records to verify compliance with orientation training requirements. Surveyor requested training records from Administrator A for Caregiver B, Caregiver C and Caregiver D. On 10/08/2024 at approximately 10:45AM, Surveyor reviewed Caregiver B's employee record to verify compliance with orientation training requirements. According to the record, Caregiver B was hired on 03/13/2023. Further review of the record revealed no evidence of the following: -Assessed needs of individuals -Emergency and disaster plans and evacuation procedures -Recognizing and responding to changes of	{N 230}		

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{N 230}	Continued From page 2 condition On 10/08/2024 at approximately 11:43AM, Surveyors interviewed Administrator A. Administrator A confirmed Caregiver B currently works with residents, but did not receive all orientation training prior to performing work duties.	{N 230}		
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 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.	N 239		

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N 239	Continued From page 3 This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure one (1) of 3 employees obtained all department approved training as required. Caregiver B did not have training in fire safety within 90 days after starting employment. Caregiver B did not have training in first aid and choking within 90 days after starting employment. Findings include: On 10/08/2024, Surveyor conducted a review of 3 employees to verify compliance with department approved training requirements. Surveyor requested training records from Administrator A for Caregiver B, Caregiver C and Caregiver D. On 10/08/2024, at approximately 11:45AM, Surveyor interviewed Administrator A. Administrator A reported s/he was having issues with caregivers not showing up for training classes. Fire Safety The record for Caregiver B, hired 03/13/2024, did not contain evidence of training or evidence of meeting an exemption for fire safety. On 10/08/2024, at approximately 11:45AM, Surveyor interviewed Administrator A. Administrator A confirmed the provider did not have evidence Caregiver B completed or met an exemption for fire safety training. First Aid and Choking The record for Caregiver B, hired 03/13/2024, did	N 239		

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N 239	Continued From page 4 not contain evidence of training or evidence of meeting an exemption for first aid and choking. On 10/08/2024, at approximately 11:45AM, Surveyor interviewed Administrator A. Administrator A confirmed the provider did not have evidence Caregiver B completed or met an exemption for first aid and choking training. Administrator A was given the opportunity to submit any additional evidence of training by 10/08/2024, but no additional evidence was provided.	N 239		
{N 243}	83.21(1)-(3) All employee training. The CBRF shall provide, obtain or otherwise ensure adequate training for all employees in all of the following: Resident rights. Training shall include general rights of residents including rights as specified under s. DHS 83.32(3). Training shall be provided as applicable under ss. 50.09 and 51.61 and chs. 54, 55, and 304, Stats., and ch. DHS 94, depending on the legal status of the resident or service the resident is receiving. Specific training topics shall include house rules, coercion, retaliation, confidentiality, restraints, self-determination, and the CBRF 's complaint and grievance procedures. Residents ' rights training shall be completed within 90 days after starting employment. Client Group. Training shall be specific to the client group served and shall include the physical, social and mental health needs of the client group. Specific training topics shall include, as applicable: characteristics of the client group served, activities, safety risks, environmental considerations, disease processes, communication skills, nutritional needs, and	{N 243}		

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{N 243}	Continued From page 5 vocational abilities. Client group specific training shall be completed within 90 days after starting employment. Client Group. In a CBRF serving more than one client group, employees shall receive training for each client group. Recognizing, preventing, managing, and responding to challenging behaviors. Specific training topics shall include, as applicable: elopement, aggressive behaviors, destruction of property, suicide prevention, self-injurious behavior, resident supervision, and changes in condition. Challenging behaviors training shall be completed within 90 days after starting employment. This Rule is not met as evidenced by: Based on record review and interview the provider did not ensure one (1) of 3 employees reviewed, obtained all training as required within 90 days after starting employment. Caregiver B did not have training in resident rights within 90 days after starting employment. Caregiver B did not have training in recognizing, preventing, managing and responding to challenging behaviors within 90 days after starting employment. Caregiver B did not have training in required client groups within 90 days after starting employment. This is a repeat violation. See Statement of	{N 243}			

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{N 243}	Continued From page 6 Deficiency (SOD) YL3J11, dated 01/29/2024. Findings include: On 10/08/2024, Surveyor conducted a review of 3 employees records to verify compliance with all employee training requirements. Surveyor requested training records from Administrator A for Caregiver B, Caregiver C and Caregiver D. Resident Rights On 10/08/2024, at approximately 11:45AM, Surveyor interviewed Administrator A. Administrator A reported s/he has difficulty with caregivers showing up to paid scheduled training. The record for Caregiver B, hired 03/13/2023, did not contain evidence of training or evidence of meeting an exemption for resident rights. On 10/08/2024, at approximately 11:40AM, Surveyor interviewed Administrator A. Administrator A confirmed the provider did not have evidence Caregiver B completed or met an exemption for resident rights training. Recognizing, Preventing, Managing and Responding to Challenging Behaviors On 10/08/2024, at approximately 11:10AM, Surveyor reviewed Resident 1's individual support plan, dated 08/20/2024. The ISP specified Resident 1, "Can be very vocal and inappropriate with comments to staff and other residents." The record for Caregiver B, hired 03/13/2023, did not contain evidence of training or evidence of meeting an exemption for challenging behaviors training. On 10/08/2024, at approximately 11:45AM, Surveyor interviewed Administrator A.	{N 243}			

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{N 243}	Continued From page 7 Administrator A confirmed the provider did not have evidence Caregiver B completed or met an exemption for challenging behaviors training. Client Group The facility was licensed to provide care and services to residents within the client groups of physically disabled, terminally ill, advanced age, and irreversible dementia/Alzheimer's. The record for Caregiver B, hired 03/13/2023 did not contain evidence of training or evidence of meeting an exemption for client group training. On 10/08/2024, at approximately 11:45AM, Surveyor interviewed Administrator A. Administrator A confirmed the provider did not have evidence Caregiver B completed or met an exemption for client group training specific to physically disabled, terminally ill, advanced age, and irreversible dementia/Alzheimer's. Administrator A was given the opportunity to submit any additional evidence of training by 10/08/2024. No additional evidence was provided.	{N 243}		
{N 247}	83.22(1)-(4) Task specific training. The CBRF shall provide, obtain or otherwise ensure adequate training for employees performing job duties in all of the following: Assessment of residents. All employees responsible for resident assessment shall successfully complete training in the assessment of residents prior to assuming these job duties. Specific training topics shall include: assessment methodology, assessment of changes in condition, sources of assessment information, and documentation of the assessment.	{N 247}		

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{N 247}	Continued From page 8 Individual service plan development. All employees responsible for service plan development shall successfully complete training in individual service plan development prior to assuming these job duties. Specific training topics shall include: identification of the resident 's needs and desired outcomes, development of goals and interventions, service plan evaluation and review of progress. Provision of personal care. All employees responsible for providing assistance with activities of daily living shall successfully complete training prior to assuming these job duties. Specific training topics shall include, as appropriate: bathing, eating, dressing, oral hygiene, nail and foot care, toileting and incontinence care, positioning and body alignment, and mobility and transferring. Dietary training. All employees performing dietary duties shall complete dietary training within 90 days after assuming these job duties. Specific training topics shall include: determining nutritional needs, menu planning, food preparation and food sanitation. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure one (1) of 3 employees obtained all task specific training. Caregiver B, who had responsibilities for providing assistance with activities of daily living, did not have training in the provision of personal care prior to assuming these duties. This is a repeat violation. See Statement of	{N 247}		

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{N 247}	Continued From page 9 Deficiency (SOD) YL3J11, dated 01/29/2024. Findings Include: Provision of Personal Care On 10/08/2024, at approximately 11:10AM, Surveyor reviewed Resident 2's individual service plan, dated 05/14/2024. The ISP specified Resident 2 requires staff assistance with toileting and bathing. The record for Caregiver B, hired 03/13/2023, did not contain evidence of training or evidence of meeting an exemption for personal care training. On 10/08/2024, at approximately 11:45AM, Surveyor interviewed Administrator A. Administrator A confirmed Caregiver B is responsible for providing personal cares. Administrator A confirmed the provider did not have evidence Caregiver B completed or met an exemption for provision of personal care training prior to assuming these job duties.	{N 247}		
{N 525}	83.47(2)(d) Fire drills. Fire drills. 1. Fire evacuation drills shall be conducted at least quarterly with both employees and residents. Drills shall be limited to the employees scheduled to work at that time. Documentation shall include the date and time of the drill and the CBRF 's total evacuation time. The CBRF shall record residents having an evacuation time greater than the time allowed under s. HFS 83.35(5) and the type of assistance needed for evacuation. Fire evacuation drills may be announced in advance. 2. At least one fire evacuation drill shall be held annually that simulates the conditions during usual sleeping	{N 525}		

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{N 525}	Continued From page 10 hours. Fire evacuation drills may be announced in advance. Drills shall be limited to the employees scheduled to work during the residents ' normal sleeping hours. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure quarterly fire drills were documented to include the time the evacuations were conducted and total evacuation time for both employees and residents in calendar year 2024. This is a repeat violation. See Statement of Deficiency (SOD) YL3J11, dated 01/29/2024. Findings include: The facility is licensed as a Class CNA (non-ambulatory) CBRF (Community-Based Residential Facility), to provide services for up to 20 residents who may be advanced aged, terminally ill and/or have irreversible dementia and/or Alzheimer's. On 10/08/2024 at approximately 10:45 AM, Surveyor was provided fire drill documentation for calendar year 2024. Review of the fire drills revealed the time of the drill and the total evacuation time for employees and residents was not documented. On 10/08/2024 at approximately 11:45 AM, Surveyor interviewed Administrator A regarding the missing requirements for the fire drills. Administrator A informed Surveyor the licensee created the new form and felt it met the	{N 525}		

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{N 525}	Continued From page 11 requirements. Administrator A ensured Surveyor the form will be updated to include the time the drill was conducted and the total evacuation time moving forward.	{N 525}			