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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 525324 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 08/19/2024 |
| NAME OF PROVIDER OR SUPPLIER Delavan Health Services | | STREET ADDRESS, CITY, STATE, ZIP CODE 905 E Geneva St Delavan, WI 53115 | |

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information) |
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| <p>F 0610</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Respond appropriately to all alleged violations.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 39713</p> <p>Based on interview and record review, the facility did not ensure that in response to allegations of abuse, neglect, exploitation or mistreatment, alleged violations are thoroughly investigated for 2 of 6 (R1 and R3, R4) reviewed for abuse.</p> <p>A review of the facility self-report involving R1, showed an allegation of neglect and the investigation into this allegation is not complete. R1 reported that her legs were wet, she was in pain, and had asked for her dressing to be changed and none of those needs were met.</p> <p>A review of the facility self-report involving R3 and R4, showed an allegation of abuse. R3 reported R4 touched R3 above the breast and 1-2 inches below the collar bone.</p> <p>Findings include:</p> <p>The facility's policy Abuse, Neglect and Exploitation last revised on 7/15/22 includes, in part: Policy: It is the policy of this facility to provide protections for the health, welfare and rights of each resident by developing and implementing written policies and procedures that prohibit and prevent abuse, neglect, exploitation and misappropriation of resident property. Policy Explanation and Compliance Guidelines: 1. The facility will develop and implement written policies and procedures that: b. Establish written policies and procedures to investigate any such allegations. V. Investigation of Alleged Abuse, Neglect and Exploitation. A. An immediate investigation is warranted when allegation or suspicion of abuse, neglect or exploitation, or reports of abuse, neglect or exploitation occur. B. Written procedures for investigations include: 3. Investigating different types of alleged violations; 4. Identifying and interviewing all persons, including the alleged victim, alleged perpetrator, witnesses, and others who might have knowledge of the allegation(s); 5. Focusing the investigation on determining if abuse, neglect, exploitation, and/or mistreatment has occurred, the extent, and cause.</p> <p>1.) R1 was admitted to the facility on [DATE] with diagnosis that include metabolic encephalopathy, diabetes mellitus type 2, end stage renal disease, renal dialysis, pulmonary hypertension, chronic pain, and disorders of calcium metabolism.</p> <p>(continued on next page)</p> |

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| <p>F 0610</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>On 12/22/23, the facility filed a Misconduct Incident Report to the State indicating that a staff member felt that two nurses failed to properly care for a resident. The CNA (Certified Nursing Assistant) reported that R1 needed something for pain and that she requested to have her dressings changed. LPN (Licensed Practical Nurse) indicates that she did not change R1's dressing as R1 stated they were too painful and that she did not want her bandages changed until tomorrow morning. R1 was provided with Norco. Dressing were reinforced but not changed by the nurse on the following shift.</p> <p>On 8/19/24 at 8:50 AM, Surveyor interviewed R1. R1 had no concerns and indicated that her legs have since healed. R1 indicated she got wound care when she needed it and pain has been controlled.</p> <p>On 8/19/24 at 2:30 PM, Surveyor interviewed NHA (Nursing Home Administrator)-A and DON (Director of Nursing)-B. Surveyor asked NHA-A and DON-B if other residents were interviewed to see if they had any concerns with wound care, care in general or pain. NHA-A stated, I didn't look at it like that, I need to widen the investigation. Surveyor asked if any other residents had concerns. NHA-A stated, I see what you are saying.</p> <p>Surveyor noted that the facility failed to complete a thorough investigation. The facility failed to interview other residents to ensure that they had no concerns with wound care or pain and the facility also failed to provide any education to staff on wound care and pain.</p> <p>29360</p> <p>2.) R3 was admitted to the facility on [DATE] with diagnosis that include Parkinson's, diabetes, dementia and anxiety.</p> <p>R4 was admitted to the facility on [DATE] with diagnosis that include prostate cancer, dementia, hypertension and congested heart failure.</p> <p>On 5/28/24 the facility filed a Misconduct Incident Report to the State Agency indicating that R3 alleged R4 touched her breast.</p> <p>On 8/19/24 at 2:17 PM, Surveyor interviewed NHA A (Nursing Home Administrator) and DON B (Director of Nursing). Surveyor asked for documentation of other resident's interviews and staff interviews that were completed as stated in the Investigation Summary. NHA A stated we are unable to find the documentation. Surveyor asked NHA A if the interview documentation should be in the investigation. NHA A stated yes, the documentation should be available.</p> <p>Surveyor noted that the facility failed to complete a thorough investigation and that the facility failed to have evidence other residents and staff were interviewed regarding the accusation of abuse.</p> <p>No additional information was provided as to why the facility did not ensure that in response to allegations of abuse, neglect, exploitation or mistreatment, alleged violations were thoroughly investigated for R1, R3 & R4.</p> |