

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 525326	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/14/2024
NAME OF PROVIDER OR SUPPLIER Pine Crest Nursing Home		STREET ADDRESS, CITY, STATE, ZIP CODE 2100 E Sixth St Merrill, WI 54452	

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)
<p>F 0806</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure each resident receives and the facility provides food that accommodates resident allergies, intolerances, and preferences, as well as appealing options.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46693</p> <p>Based on interview and record review, the facility did not ensure residents (R) receive food that accommodates the residents' preferences and options of similar nutritional value are provided for residents who choose not to eat the food that is initially served for 1 of 3 residents reviewed. (R6)</p> <p>Finding include:</p> <p>The facility policy titled, Diet Manual and Diet Order Terminology, states, .3.3 During meal observation, monitor tickets for accuracy of resident information and understanding of ticket information by nursing staff .</p> <p>The facility policy titled, Dining Services Guidelines, states, .Offer alternatives meet the nutritional, religious, cultural, and ethnic needs, and preferences of the resident .</p> <p>R6 was admitted to the facility on [DATE] with diagnoses that include, diabetes, severe obesity, heart failure and gastrointestinal reflux disease. R6's Minimum Data Set (MDS), dated [DATE], identified that R6 has a Brief Interview for Mental Status (BIMS) score of 15 that indicates that R6 has intact cognition. MDS also stated R6 has clear speech, understands, and is understood. R6 requires staff assistance for bathing, transfers, toileting, and set up assistance for meals.</p> <p>On 10/14/24 at 12:45 PM, Surveyor interviewed R6 and asked if R6 is receiving the correct meals regarding allergies, preferences, and restrictions. R6 replied, No. For instance, this morning it is clearly on my meal ticket that says not to give sausage or gravy and that it what I got. Surveyor asked R6 if it was reported to kitchen. R6 stated, I did have the aide tell the kitchen, then they gave me hard boiled eggs instead. It is just frustrating because I seem to have to do this all the time. Surveyor clarified that the resident noticed the error and not the dietary staff or the aide that passed the tray.</p> <p>Surveyor reviewed R6's dietary note, dated 07/10/24, which states, .Tray card updated w/preferences (does not like fish, no cow, no pork sausage) .</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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0806</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 10/14/24 at 1:15 PM, Surveyor interviewed Certified Nursing Assistant (CNA) C and asked how it is known which residents have dietary restrictions and what do you do if a resident receives food/fluids that are restricted or not wanted. CNA C stated that meal tickets come on the trays from the kitchen with the allergies, likes/dislikes, and special plates, cups etc. We check that against what they get. They do have to bring items back to the kitchen sometimes. It seems to go in waves where it is good for a while, then there are times that we are bringing things back a lot. For instance, sometimes we get liquids that are supposed to be a certain thickness and it is too runny. Sometimes they do give residents something they do not like. When that happens, we notify the kitchen staff, and they give something else.</p> <p>On 10/14/24 at 3:53 PM, Surveyor interviewed Director of Nursing (DON) B and shared the concern above. Surveyor asked about resident's meal ticket expectations regarding allergies, likes/dislikes, and equipment. DON B stated it would be expected that staff in the kitchen provide meals per the doctor orders and residents' preferences and not to receive food with allergies. It is expected that the staff passing the trays check the foods against the tickets to ensure residents are receiving the appropriate foods, consistencies, and adaptive equipment.</p>		