

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 525352	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/24/2024
NAME OF PROVIDER OR SUPPLIER Lancaster Health Services		STREET ADDRESS, CITY, STATE, ZIP CODE 1350 S Madison St Lancaster, WI 53813	

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 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.</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 immediately report alleged violations of abuse to the State Agency and local law enforcement for 2 of 3 reportable incidents (R8 and R9).</p> <p>On 3/21/24, R8 reported that he was unable to find the cash that he kept in his room. R8 indicated that there was a grand that he was unable to locate. NHA A failed to report this Suspicion of a Crime to local law enforcement and the State Agency.</p> <p>On 3/16/24, R9's daughter called the facility to report that R9's wedding ring was missing. NHA A failed to investigate the allegation or report this Suspicion of a Crime to local law enforcement and the State Agency.</p> <p>This is evidenced by:</p> <p>The facility's policy and procedure, Abuse, Neglect, Exploitation Policy, last revised 7/15/22, states in part, the following: 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. VII. Reporting/Response. A. The facility will have written procedures that include: 1. Reporting of alleged violations to the Administrator, state agency, adult protective services, and to all other required agencies (e.g., law enforcement when applicable) within specified timeframes.</p> <p>Example 1</p> <p>R8 was admitted to the facility on [DATE] with diagnoses that include, in part . COPD (chronic obstructive pulmonary disease), acute and chronic respiratory failure with hypoxia, Type 2 diabetes mellitus, and heart failure.</p> <p>R8's Admission Minimum Data Set (MDS) dated [DATE] indicates R8 has a Brief Interview of Mental Status) of 12, indicating mild cognitive impairment. R8's does not have an Activated Healthcare Power of Attorney (AHCPOA) and is his own decision maker.</p> <p>On 3/21/24, a grievance form was completed stating in part . R8 stated that he can't find cash that he keeps in his room. He said that he hid it in a new place and now can't find it. R8 was asked by staff how much he had been keeping in his room and R8 stated, a grand.</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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<p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 4/24/24 at 10:55 AM, Surveyor interviewed NHA A (Nursing Home Administrator) and VPS C (Vice President of Success). Surveyor asked what the facility did with R8's concern of missing money. VPS C stated that the resident found the money the next day. Surveyor asked NHA A and VPS C if R8 reporting a large amount of money missing should have been reported to the State Agency and law enforcement. NHA A stated, yes. VPS C indicated, he (R8) found the money the next day, but (VPS C) cannot say that it was within 24 hours of R8 reporting it to us missing. VPS C indicated he did not keep a timeline of when it was reported and when it was found.</p> <p>Example 2</p> <p>R9 was admitted to the facility on [DATE] with diagnosis that include, in part . unspecified dementia, anxiety disorder, insomnia, and chronic kidney disease.</p> <p>R9's Quarterly Minimum Data Set (MDS) dated [DATE] indicates that R9 has a Brief Interview of Mental Status (BIMS) of 5, indicating severe cognitive impairment. R9 has an Activated Healthcare Power of Attorney (AHCPOA).</p> <p>On 3/16/24, a grievance form was completed stating in part . R9's daughter reported that her mom's wedding ring is missing. She noticed it about 3 weeks ago and again today that her mom is wearing a bingo prize ring. When she asked R9 where her wedding ring is, she was unsure. R9's daughter looked but couldn't find it in her room.</p> <p>On 4/24/24 at 10:55 AM, Surveyor interviewed NHA A (Nursing Home Administrator) and VPS C (Vice President of Success). Surveyor asked NHA A and VPS C about R9's missing wedding ring. VPS C states that R9 has a history of misplacing items, and it was believed that she had thrown the ring away. Surveyor asked VPS C and NHA A if this was something that should have been reported to the State Agency and Law Enforcement. NHA A stated, yes. VPS C stated, even though we know she has a history of throwing items away and this was the likely conclusion. Surveyor asked VPS C if the item could have been misappropriated. VPS C stated the likely cause was R9 throwing away the item.</p> <p>The facility completed grievance forms on the missing money and missing items, but did not report these concerns to the State Agency or law enforcement per the regulatory requirements.</p>		