

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 525371	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/30/2025
NAME OF PROVIDER OR SUPPLIER Bayshore Nursing & Rehab		STREET ADDRESS, CITY, STATE, ZIP CODE 1300 West Silver Spring Dr Glendale, WI 53209	

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 0558</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Reasonably accommodate the needs and preferences of each resident.</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 0558</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview and record review, the Facility did not ensure 1 (R1) of 3 Residents were provided with reasonable accommodations of Resident needs and preferences. R1 does not eat the Facility food and has her meals delivered one time a week. R1 stores her food in her room refrigerator and requests to have her food heated. The Facility was aware R1 does not eat the Facility food and did not heat R1's meal when requested. Findings include: The Facility policy entitled, Resident Rights, dated 3/1/25, documents, in part, . Policy Explanation and Compliance Guidelines: .All residents will be treated equally regardless of age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, or gender identity or expression. The facility will ensure that all staff members are educated on the rights of residents and the responsibility of the facility to properly care for its residents. Resident Rights. The resident has the right to a dignified existence, self-determination, and communication with the access to persons and services inside and outside the facility. Self-determination. The resident has the right to make choices about aspects of his or her life in the facility that are significant to the resident. R1 was admitted to the facility on [DATE] with diagnoses which include, lupus erythematosus, arthritis, protein-calorie malnutrition, and major depressive disorder. R1's Annual Minimum Data Set (MDS), dated [DATE], documents R1 has a Brief Interview for Mental Status (BIMS) score of 15, indicating R1 is cognitively intact. R1's Care Plan Intervention, date initiated 6/29/25, documents, resident refuses to eat facilities food and refuses a tray on a regular basis. Does have food brought in from family/friends. Surveyor interviewed R1 on 7/30/25, at 10:11 AM, who stated she does not eat the facility food, and her son brings ready to eat or precooked food to her one time a week that just needs to be heated up. R1 stated she typically eats cold food for breakfast and lunch and wants her food heated for dinner. R1 stated, the unit used to have a microwave, but it broke a few weeks ago so now the staff need to go to the kitchen. R1 stated it is a problem on second shift to get her meals heated as the kitchen staff will not do it. R1 cited a specific example on 7/21/25 at 5:25 PM when R1 had Certified Nursing Assistant (CNA)-C, ask Dietary Aide (DA)-D if R1's can of chili could be opened and heated up and DA-D stated she was done cooking and would not do it. R1 stated, CNA-C felt very bad about this. R1 stated, she then called the kitchen and spoke with DA-D and R1 stated she told DA-D that Dietary Manager (DM)-E has told R1 she can have her food heated up and DA-D told R1 she did not care what DM-E says and she is not going to do it. R1 stated DA-D is the mother-in-law of DM-E and thinks DA-D does not have to listen to DM-E. R1 stated she had a follow up conversation the next day with Dietary Supervisor (DS)-F who stated she spoke with DA-D and R1's meals will now be heated up between the hours of 6:00 AM and 6:00 PM with making the request an hour in advance. R1 stated she should not have to be scared to get a warm meal. R1 has only asked one time since 7/21/25 for evening meal to be heated. On 7/31/25, at 12:56 PM, Surveyor interviewed CNA-C who confirmed she was the staff member who went to the kitchen on behalf of R1 on 7/21/25, between 5:00 PM and 6:00 PM to ask for R1's can of chili to be opened and warmed. CNA-C stated she was told by DA-D, no, and DA-D stated she was cleaning up the kitchen and it was too late. On 7/31/25, at 10:44 AM, Surveyor interviewed DM-E and DS-F. Surveyor asked DM-E what the process is for staff to heat up food for residents. DM-E stated, the staff used to warm up food in the microwave, but the microwave broke about two weeks ago. Surveyor asked if there was any other microwaves and DM-E stated, there was another microwave in the staff lounge, but DM-E stated, staff were instructed to go to the kitchen to have food heated until a new microwave was provided. DM-E stated there has been a hold on purchasing with the current facility receivership but DM-E plans to order a new microwave on Monday, 8/4/25. Surveyor asked if either DM-E or DS-F is aware of any kitchen staff refusing to heat up food for residents. DS-F stated she was told by one of the CNA's the following day, 7/22/25 that R1 did not get her chili heated up the day prior, 7/21/25. DS-F spoke with R1 and stated, moving forward R1 will have her meals heated between the hours of 6:00 AM and 6:00 PM. DS-F stated R1 was fine with the solution and there have been no issues since but R1 has only asked one time to have food heated since the incident. DM-E recalled a recent issue regarding heating up chili for R1 and DA-D's refusal to heat. DM-E stated he spoke with DA-D, and she stated it was after 6:00 PM and she was cleaning up so she said no to the request. DM-E stated he provided a verbal warning to DA-D regarding the incident. DM-E acknowledged DA-D is his mother-in-law and it can be challenging working together. On 7/31/25, at 11:29 AM Surveyor interviewed DA-D and DM-F. Surveyor asked DA-D what is the process when residents ask to</p>		