

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  525426	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  11/13/2024
NAME OF PROVIDER OR SUPPLIER  Hillview Health Care Ctr		STREET ADDRESS, CITY, STATE, ZIP CODE  3501 Park Lane Dr LA Crosse, WI 54601	

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 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>31086</p> <p>Based on observation, interview and record review, the facility did not maintain a safe and sanitary environment in which food is prepared, stored, and distributed. This has the potential to affect all 51 residents who reside in the facility.</p> <p>Facility staff did not conduct appropriate hand hygiene and were observed touching ready to eat foods with contaminated gloved hands.</p> <p>This is evidenced by:</p> <p>Facility's policy Hand Hygiene-Kitchen with the revised date of 08/31/22 read in part, 2. How to wash hands: . c. Scrub well with soap and additional water as needed, scrubbing all areas thoroughly. Pay close attention to the fingernails using a brush as needed. Scrub for a minimum of 10 to 15 seconds within the 20 second hand washing procedure. Apply vigorous friction between the fingers and fingertips. Rinse with clean, running warm water. d. Rinse thoroughly. e. Dry hands with paper towel. f. Use a clean paper towel to turn the faucet off and open the door if needed, and then discard towel.</p> <p>On 11/12/24 at 7:37 AM, Surveyor observed Culinary Services Assistant (CSA) H washing hands. When CSA H completed washing hands, CSA H turned the faucet off with clean hands then dried his hands.</p> <p>On 11/12/24 at 7:39 AM, Surveyor observed CSA I was preparing a salad and removed gloves. CSA I touched the lid of the garbage can and threw gloves away. CSA I, with contaminated hands, picked up a cover and placed on the salad container. CSA I dated the salad and put it into the refrigerator.</p> <p>On 11/12/24 at 7:42 AM, Surveyor observed CSA I completed hand washing and turned the faucet off with their clean hands. CSA I dried hands, applied gloves, and started the meal tray line. CSA I wore the same gloves during the service of the meal trays. CSA I touched the cart with fruit cups, moved a butter container from another counter, and touched a cake pan. CSA I was cutting a cake in a pan and touched the pieces. Multiple times during tray line CSA I touched the cake, the bread bag, placed the bread in the toaster, and held the toast to butter.</p> <p>On 11/12/24 at 8:35 AM, Surveyor observed CSA K with gloved hands bring a tray cart to the unit and came back to the kitchen with the same gloves on. CSA K then touched the napkins, moved the silverware tray to another table, and brought the tray cart to the dish room. CSA K removed gloves, washed hands, turned the faucet off with clean hands and then dried hands.</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 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>On 11/12/24 at 11:45 AM, Surveyor observed Food Service Supervisor (FSS) L ask CSA J to remove gloves and wash hands after touching hair net and face. CSA J washed hands for approximately 5 seconds and turned the faucet off with her clean hands. CSA J applied gloves and continued with meal tray line.</p> <p>On 11/13/24 at 9:37 AM, Surveyor interviewed FSS L about hand hygiene within the kitchen. Surveyor reviewed with FSS L of Surveyor's observations of staff's hand hygiene process. FSS L indicated the proper procedure is to wash hands and dry with the water still running and take a new paper towel to turn the faucet off. FSS L indicated staff during tray line should not be wearing gloves and should be using tongs and spatulas to serve the ready to eat foods. FSS L indicated they had training on Relias within the last year and written audits have not been completed but do daily visual audits of staff. FSS L indicated hand hygiene training will begin.</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Provide and implement an infection prevention and control program.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47657</b></p> <p>Based on observation and interview, the facility did not establish and maintain an infection prevention and control program designed to provide a safe, sanitary, and comfortable environment, and to help prevent the development and transmission of communicable diseases and infections for observations of mishandled laundry, having the potential to affect all 51 residents, and 1 of 1 (R) resident observed for catheter care while on Enhanced Barrier Precautions (R11).</p> <p>This is evidenced by:</p> <p>Example 1</p> <p>Facility policy titled Transmission Based Precautions, last reviewed and revised 04/30/24, states, Standard precautions are used by staff and residents at all times. Standard precautions are the primary strategy for control and prevention of infections. Standard precautions are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection in the facility. Under section titled Contact Precautions - Gowns states in part, Remove gown and discard of gown appropriately, after gown removal, staff should ensure that clothing does not contact potentially contaminated environmental surfaces to avoid transfer of microorganisms to other residents or environment.</p> <p>On 11/12/24 at 10:54 AM, Surveyor observed Activities of Daily Living cares (ADL) followed by wound care on R4.</p> <p>On 11/12/24 at 11:20 AM, Surveyor observed Certified Nursing Assistant (CNA) C complete ADL cares on R4. CNA C placed dirty linens in a plastic bag, removed PPE gown, rolled up into a ball, and without placing in a bag, exited into hallway and discarded in hamper situated in hallway two doors down.</p> <p>On 11/12/24 at 11:57 AM, Surveyor observed Registered Nurse (RN) E, after completing R4's wound care, remove gown and without putting PPE gown into a bag, exited into hall and discarded in hamper situated in hallway two doors down.</p> <p>On 11/12/24 at 11:59 AM, Surveyor observed Nurse Manager D after assisting with R4's wound care, remove gown and without putting PPE gown into a bag, exited into hall and discarded in hamper situated in hallway two doors down.</p> <p>On 11/13/24 at 10:59 AM, Surveyor interviewed RN E regarding procedure of discarding PPE after use. RN E stated in the past we would toss linens down a laundry chute, but since laundry services are no longer at facility every day, we use the two hampers in the hallway that separate linens from PPE and staff are to bring cart outside resident room. Surveyor shared observation of RN E on 11/12/24 removing contaminated PPE after assisting R4 with ADLs and wound care and exiting room with contaminated gown and discarding in hamper down hall without bagging. RN E stated we should be putting them in a plastic bag before leaving a resident's room.</p> <p>(continued on next page)</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>On 11/13/24 at 11:06 AM, Surveyor interviewed Nurse Manager D (who is the facility's Infection Preventionist) regarding processes and observations on 11/12/24 of R4's ADL and wound care, performed by Nurse Manager D, CNA C, and RN E. Nurse Manager D stated they probably should place contaminated PPE in a plastic bag before exiting a resident room or have bins in the room.</p> <p>On 11/13/24 at 11:59 AM, Surveyor interviewed Director of Nursing (DON) B regarding observation and expectations with discarding contaminated PPE. DON B stated expectation would be for all laundry items to be bagged before leaving the resident's room per facility's policy of remove gown and discard of gown appropriately.</p> <p>40590</p> <p>Example 2</p> <p>On 11/13/24 at 9:47 AM, Surveyor observed CNA M coming out of resident room [ROOM NUMBER] with a bath blanket tucked under her left arm. CNA M was observed standing in the hallway talking to a volunteer who had brought in three small dogs for pet visits. There was an Enhanced Barrier Precautions (EBP) sign on the door of room [ROOM NUMBER]. CNA M was then observed going to a dirty laundry bin in the hallway and putting the bath blanket in the dirty laundry bin.</p> <p>At 10:15 AM, Surveyor observed CNA M coming out of resident room [ROOM NUMBER] with linen tucked under her left arm.</p> <p>At 10:34 AM, CNA M was in resident room [ROOM NUMBER]. There was a sign on the door of room [ROOM NUMBER] for EBP.</p> <p>At 10:49 AM, Surveyor observed CNA M exit room [ROOM NUMBER] with several linen items in her hands. CNA M was also holding a pair of goggles in her right hand. In CNA M's left hand was a clear bag with washcloths and towels. A PPE gown was draped over CNA M's left forearm and two dark blue cloth napkins were on top of the PPE gown. These items were up against her body to hold them. CNA M then switched these linens to be held with her right arm up against her body to use her left arm to place the linen in the dirty linen bins. The PPE gown was placed in the bin labeled SOILED LINEN HILLVIEW ONLY (all residents personal items) personal clothing, personal bedding, PPE gowns, gripper socks. The PPE gown was not contained in a clear plastic bag. The clear plastic bag and blue cloth napkins were placed in the bin labeled, SOILED LINEN (BANDBOX ONLY) (all bedding &amp; linens) bedspreads, flat/fitted sheets, pillowcases, bath towels, hand towels, wash clothes, blue pads, bath blankets, blue linen clothing protectors.</p> <p>At 11:12 AM, Surveyor interviewed CNA M who stated that the soiled linen bins are supposed to be next to the door of the room or in front of door so linen can be placed in them.</p> <p>At 11:50 AM, Surveyor observed CNA M walking down the 600 wing hallway past Surveyor with a large amount of dirty linens in her hands/arms. Linens were not contained and open to the air. CNA M disposed of linens in a dirty laundry bin in the hallway. CNA M sanitized her hands and entered a clean linen room. CNA M was observed coming out of the linen room a few minutes later with a clean, folded flat sheet tucked under her left armpit.</p> <p>31086</p> <p>(continued on next page)</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Example 3</p> <p>R102 was admitted to the facility with diagnoses of displaced fracture of shaft of left clavicle, Parkinson's disease, dementia, and nephrostomy.</p> <p>On 11/12/24 at 9:57 AM, Surveyor observed RN D provide care to R102's nephrostomy tube site. RN D sanitized hands, applied a gown, and set up supplies with a barrier on the over the bed tray table. RN D removed the nephrostomy site dressing and noted the dressing had a little serosanguineous drainage. RN D removed gloves, sanitized hands, applied gloves, and cleaned the site with gauze and saline. RN D removed gloves, sanitized hands, and applied clean gloves. RN D dried area with a clean gauze. RN D removed gloves, sanitized hands, removed gown, sanitized hands, and left the room with the gown not contained in a bag, to gather supplies of split gauze. RN D returned and sanitized hands, applied a gown, washed hands, and applied clean gloves. RN D cleansed the site again using the same process. RN D removed gloves, sanitized hands, applied clean gloves, and applied the split gauze to the nephrostomy site. RN D removed gloves, sanitized hands, applied clean gloves, and applied medipore over the split gauze. RN D removed gloves, sanitized hands, gathered supplies and garbage. RN D washed hands and removed gown by keeping the gown inside out and left R102's room with the gown in hand and not contained in a plastic bag. RN D walked down the hallway past two resident rooms, placed the gown in the laundry bin, and sanitized hands.</p> <p>On 11/13/24 at 12:00 PM, Surveyor interviewed DON B about her expectation of Surveyor's observation of RN D removing gown in R102's room and walking down the hallway with gown not contained in a bag. DON B stated the expectation is to bag the dirty linen before bringing out of the room.</p> <p>49353</p> <p>Example 4</p> <p>Facility policy titled, Transmission Based Precautions with a most recent revised date of 04/30/24 states in part: .Standard precautions are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection in the facility. Enhanced Barrier mirrors Contact Precautions though are used in specific care activities .designated high contact activities include dressing, bathing, hygiene, transferring, linen change, toileting/brief change, indwelling line care, wound care.</p> <p>Enhanced Barrier Precautions will be used, in addition to Standard Precautions, for a resident who is known to be colonized with MDROs, has a chronic wound, or has an indwelling medical device. Examples of indwelling medical devices include central lines, urinary catheters, feeding tubes, or tracheostomies.</p> <p>.Enhanced Barrier Precautions-PPE use: Glove, gown, mask and eye protection as stated in Contact Precautions [Mask and eye protection used when activity likely to generate splashes or spray of blood, body fluids, secretions, and excretions.]</p> <p>Findings:</p> <p>(continued on next page)</p>		

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