| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 525458 | A. Building<br>B. Wing | 09/24/2025 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
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| Park View Home | 220 Lockwood St<br>Woodville, WI 54028 |

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

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| F 0812<br><br>Level of Harm - Minimal harm or potential for actual harm<br><br>Residents Affected - Many | Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.<br><br>Based on observation, policy review and interview, the facility did not ensure food was stored, prepared, and served with proper food handling practices to prevent the outbreak of foodborne illness. This has the potential to affect all 44 residents (R) residing in the facility. 1. Staff did not follow safe food cooling protocols. Staff did not monitor and document cooling temperatures. Hot food was mixed with cool food, increasing risk for harmful bacteria growth in the leftovers.2. The dry storage area and kitchen cooler contained multiple food items not labeled with open or use-by dates. Bulk food removed from original packaging and not labeled with date or use by dates. 3. An employee walked through the kitchen with no hairnet4. Staff did not follow accepted standards of practice for taking food temperatures consistently and documenting cooked food temperatures, ensuring food is held safe temperatures while being served.5. Staff did not ensure cross contamination was prevented. Staff handled clean dishes with contaminated clothes.Findings include:According to Wisconsin Food Code, section 3-501.16, It is prohibited to mix hot food with cooled leftovers in a single container for storage. The primary reason for this rule is to prevent the temperature of the cold leftovers from rising back into the temperature danger zone (41-135 F), where harmful bacteria can multiply rapidly. The facility policy, titled Leftover, reviewed last 4/18/25, states: To store leftover food properly under sanitary conditions to prevent food borne illness.-Refrigerate or Freeze leftover within 2 hours .-Leftover can be kept in the refrigerator for 7 days at 41 and then must be eaten or placed in freezer.The facility policy, titled Food Temperatures, reviewed last 1/21/25, states .Acceptable Holding Temperatures.-Foods must be cooled for 135 F to 70 F within 2 hours; from 70 F to 41 F within 4 hours; the total time for cooling from 134 F to 41 F and should not exceed 6 hours; temperatures must be documented.Example 1On 9/22/25 at 8:19 AM, during initial tour, Surveyor observed multiple containers of leftovers. Dietary Manager (DM) D stated cooks would not use food without looking at dates. DM D started pulling things off the shelf and taking food out of the cooler. DM D stated DM D typically has cooks use food in 2-3 days or food is discarded. The following items fall outside the facility's date range for left-over use policy of 7 days. (9/15/25) -Mashed potatoes 9/14/25-Corn - no label (on menu 9/10/25)-Baked potatoes - no label (on menu 9/14/25) -Red noodle mixture - no label - DM called it casserole - unable to identify what its date is per menu calendar.On 09/23/25 at 12:50 PM, Surveyor observed [NAME] (CK) G put away leftovers. CK G brought food back from the kitchenette 1 on a 3 tier open non-heated cart. Surveyor observed CK G pull tall see through plastic containers from the cooler with food already in them. They were labeled with the item and today's date, from another kitchenette not identified on the label. CK G proceeded to add food just taken from kitchenette 1's steamless heating table, with the food already cooling in the containers. After observing CK G put the veggies and meat gravy main course into containers with their like food, Surveyor asked CK G to temp the rice from kitchenette 1 and the rice from the cooler. The rice from kitchenette 1 was 139 F and the rice from the cooler in the storage container was 124 F. After taking the rice's temperature, CK G put the warmer rice with the rice from the cooler and put containers back in the cooler with lid ajar (tented). CK G only temped the rice and did not record this temp on a log. On 9/23/25 at 12:53 PM, Surveyor interviewed CK G who stated they put food in containers as it comes<br>(continued on next page) |

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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| F 0812<br><br>Level of Harm - Minimal harm or potential for actual harm<br><br>Residents Affected - Many | back and place in the cooler. The container is tented, and the night shift covers them completely when it is cool.On 9/23/25 at 12:55 PM, the final kitchenette's food was brought back into the kitchen via the 3 tier open non-heated cart. CK G pulled the containers back out of the cooler and proceeded to mix the food that just came back from the warming steamless tables with food from the cooler. CK G combined the rice and then veggies without getting a temperature. Surveyor asked if CK G would get the temperature of the meat and gravy before CK G mixed them. The meat and gravy returning to the kitchen was 161 F and the meat and gravy from the cooler was 124 F. CK G proceeded to add the meat together and put all items back in the cooler with lids ajar. No other temperatures were taken. The temperatures the Surveyor asked to be taken were not recorded or logged. Surveyor observed the container was 1/3 to 1/2 full. On 9/24/25 at 10:23 AM, Surveyor interviewed DM D who stated we follow Wisconsin Food Code. DM D stated that after we serve lunch, we will try to save what we can, put in a container, label and date. Let it cool down in the cooler. DM D stated leftovers are used within 2-3 days, if possible; leftovers are used for the PM snack. Surveyor asked if leftovers from each kitchen should be put in one container. DM D stated no they should be put in separate containers labeled kitchenette (K) K1, K2, K3. DM D stated if you mix it all together there is risk of a food borne illness. If K1 is a different temperature and it is put together there could be a food borne illness and it contaminates the whole batch. Example 2 According to Food Code and Federal regulations CMS F812, foods in nursing home storage needs to be labeled with a received date or a similar date like a use by or made on date.The facility policy, titled Food Storage, reviewed 4/18/25, states: Policy: to store, prepare, distribute and serve food under sanitary conditions to prevent food borne illness.Procedure: .-Food items will be dated when opened and discarded when expired.-Food items removed from original container will be labeled (identified), dated, and discarded when expired.On 9/22/25 during the initial kitchen tour that began at 8:16 AM, Surveyor observed the following undated items:In kitchen cooler there were:-Chicken patties - open, not labeled with open date or use by date.-Commercial size BBQ sauce, no open date or use by date.-Commercial size French dressing, no open date or use by date.-Frozen bag of food on bottom shelf, not open but no manufacturer food label or dates. No label of when taken out of freezer on product or bin it was being kept in. DM D stated it was chicken soup.-Square tube of meat, not open but no manufacturer food label or dates. DM D stated it was precooked ham patties.-None of the manufacturer packaging or the shipping/bulk box, had a label on when it was received or placed in the cooler, or visual identifier in what order to use what.In kitchen cook's area there was:-Oatmeal container, not labeled with open date or use by date.In cook's cooler there was:-Frosted crackers, not labeled or dated. DM D stated they are for snack today. In downstairs dry storage there was:-Cereal in waxy plastic bags lying on the shelves, no manufacturer's food label, dates or lot. DM D identified the bags as Chex and [NAME] Krispies. DM D stated, I used to keep in box, but it took up so much room. Bags were not labeled with received date either.-5 bins with Chef's Brand 24 oz size foil like bags of blueberry gelatin, orange gelatin, cherry gelatin, whipped topping mix, chocolate pudding. DM D stated it was removed from bulk packaging and put in bins for storage purposes. Food bags had a manufacturer's label identifying what the food product was. Surveyor asked DM D to find an expiration date or lot number. DM could not find a date or lot number on any of the food bags. There was no facility created label with date of receipt or a use by date. On 9/23/25 at 7:25 AM, Surveyor made the following observation during kitchen follow up tour,In kitchen cooler:-Frozen meat in tub on bottom shelf with no manufacturer's label, no label on container with date removed from freezer or use by date. DM D stated it was hamburger.On 9/22/25 at 8:32 AM, Surveyor interviewed DM D who stated we followed the manufacturer's dates on their labels. Surveyor asked how do you know what to use first if they do not have dates. DM D stated we can also look up lot numbers for dates. DM D stated all items are used first come first use or old is placed in front and new in the back when put away. DM D stated we go through food so quickly. 9/24/25 at 10:21 AM, DM D stated DM D's expectation is that staff label anything they prepare and put in the fridge for leftovers, and to follow the expiration dates.Example 3According to Section<br>(continued on next page) |

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| F 0812<br><br>Level of Harm - Minimal harm or potential for actual harm<br><br>Residents Affected - Many | 2-402.11 of the FDA Food Code, Food employees are required to wear hair restraints such as hats, hair coverings, nets, beard restraints, and clothing that covers all body hair to prevent hair from contacting exposed food, clean equipment, and utensils. Per Wisconsin Food Code [NAME] restraint rule: Unlike head hair, the code is specific about facial hair Effective restraints must be worn for beards longer than 1/2 inch in food processing areas. On 09/23/25 at 1:26 PM, Surveyor observed Maintenance Supervisor (MS) E walk into the main kitchen with MS E's hair net on MS E's head like a beanie. MS E also had a full beard, greater than a 1/2 inch in length and no beard net. CK G noticed MS E's hair net and told him to straighten it. MS E stated he had no hair back there but adjusted his hair net to cover to the nape of his neck, and his entire head of hair. MS E turned to go back to MS E's task. Surveyor asked MS E if he had any other hair to cover. MS E said Oh and pulled the hair net completely over his head, face and beard. MS E then walked back to the entry way open door and looked at wall. MS E said MS E did not think we (the facility) had anything for MS E ?s beard. MS E stated MS E does not usually come in here, his coworker does, and his coworker doesn't have a beard. MS E came back into the kitchen, straightened MS E's hair net on MS E's head so it was no longer covering MS E's face and beard and continued tour with Life Safety Surveyor. On 9/24/25 at 10:08 AM, Surveyor interviewed DM D who stated yes, we have beard nets. Surveyor informed DM D about MS E entering kitchen without a beard net on yesterday. DM D stated MS E does not come through the kitchen often. DM D stated MS E knows MS E should wear a hair and beard net. DM D stated everyone that comes into the kitchen should have a hair net on most definitely. We have a ton of beard nets and MS E knows it.Example 4According to Food and Drug Administration Food Code, section 3-401.12 Records, Creation, and Retention: Records must be maintained to verify that the critical limits required for food safety are being met. It is standard practice to maintain temperature logs to document when food temperatures are checked and to ensure compliance with federal and state regulations, State 483.60.The facility policy, titled Food Temperatures, reviewed last 1/21/25, states: -Dietary staff will be trained in food safety practice and preparation to ensure that food is palatable, attractive and at the proper temperature. The Dietary manager will monitor this protocol, review temperature logs and report any negative findings to the facility Quality and Assurance Performance Improvement Committee. -Before taking food out of the main kitchen to the household hot well dining rooms, the cook will use a calibrated thermometer to check whether meat has reached a safe internal temperature.-This process will be repeated prior to serving from the hot wells in each household for all meals to ensure appropriate holding temperature.-Staff will record each food item temperature on the appropriate log.On 9/23/25 at 11:31 AM, Surveyor observed kitchen staff prepare to take food temperatures for lunch meal. CK G stated CK G already took temperatures when food came out of the oven. All food was in metal pans, covered and sitting on stove top. CK G said CK G has to take food temperatures before food leaves the kitchen. Surveyor observed food temperatures taken and food being placed on a 3 tier open non heated cart used to bring food to kitchenettes. All food for K1, K3 and then K2 had its temperature taken and placed on its kitchenette's cart. When asked,CK G stated she already took the temperature of food when it came out of the oven. CK G did not record any temperatures taken with Surveyor before leaving kitchen at 11:49 AM. On 9/23/25 at 11:50 AM, Surveyor observed the kitchen temperature log with CK F. CK F showed how the log was split into sections, breakfast, lunch, dinner and that only one set of temperatures were recorded in each section. CK F stated we record the temperature of the food when it comes out of the oven only. Temperatures for 9/23/25 lunch was on log. CK F stated CK F takes temperatures of food when it comes out of the oven and before it leaves the kitchen; this is often the same time. CK F says CK F takes it again before CK F serves the food in the dining room.On 9/23/25 at 12:21 PM, Surveyor observed CK G serving food in Kitchenette #1. Surveyor asked CK G if CK G took the temperature of the food before CK G served it. CK G said CK G did not take temperatures again before serving. CK G stated CK G has done it enough to know it will hold the temperature. CK G stated CK G does not need to take temperature again if it is the right temperature when it leaves the kitchen. CK G stated the<br>(continued on next page) |

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| F 0812<br><br>Level of Harm - Minimal harm or potential for actual harm<br><br>Residents Affected - Many | steamless warming table will hold the temperature. On 9/23/25 at 12:21 PM, Surveyor asked to see the temperature log for the kitchenette #1. CK G said there are no food temperature logs on the kitchenettes. On 9/23/25 at 12:21 PM, Surveyor observe staff struggle with finding a thermometer in kitchenette 1 where all residents were already eating food. Surveyor asked CK G to get the temperature of the meat and gravy before CK G served it. CK G stated CK G did not think there were thermometers in the kitchenettes. CK G had to open 4 drawers before CK G found a thermometer in the back of the drawer. CK G did not wipe the thermometer before taking the temperature. Meat and gravy temperature was 150 F. Surveyor had observed meat and gravy's temperature at 178 F when it left the kitchen.On 9/23/25 at12:33 PM, Surveyor observed CK F serve in kitchenette #2. Prior to CK F serving food, CK F looked for a thermometer in all the drawers. No thermometer in kitchenette, CK F went back to kitchen to get one. CK F came back to kitchenette with thermometer, took food temperatures, did not write any down. CK F stated the only temperature log is in the kitchen.On 9/24/25 at 10:22 AM, Surveyor interviewed DM D who stated food is to be temped before it leaves the kitchen and before it is served. DM stated there are thermometers in the kitchenettes. Food temps should be taken before serving and at end to make sure it held temperature the whole time. DM D stated all temperatures should be recorded but they haven't been. DM D stated DM D needs to come up with a new form so they (the cooks) can record temps when they get temps for food served and before it leaves the kitchenette.Example 5 The facility policy, title Food Serving, last reviewed 4/23/25, states: 8. Be mindful that the last plate served should be the same quality as the first.Food Code, section 2-304.11 states, Food employees shall wear clean outer clothing to prevent contamination of food, equipment, utensils, linens, and single-service and single-use articles .On 9/23/25 at 8:58 AM, Surveyor observed Dietary Aide (DA) H in kitchenette # 1 begin to clean up after breakfast. DA H was leaning over sink, soaking utensils in a bucket. When DA H stood up DA H's shirt showed wet spots and food debris. DA H stated DA H wore gloves to rinse dirty dishes before they were put in the dishwasher. DA H stated DA H does not wear anything else while doing dirty dishes. DA H stated DA H washes DA H's hands before DA H puts the clean dishes away. DA H stated when DA H is done cleaning up, DA H will go back to the kitchen to put together the dessert cart.On 9/23/25 at 9:12 AM, Surveyor observed DA H put clean dishes away wearing the same contaminated clothing DA H washed dishes with. No barrier between clean and dirty. On 9/23/25 at 10:15 AM when Surveyor entered the kitchen, Surveyor observed DA H was putting desserts on a cart with the same contaminated clothing and no apron to cover. On 9/23/25 at 1:24 PM, Surveyor observed CK G do dishes in the kitchen. CK G was only wearing gloves as CK G rinsed a pan with gravy. Surveyor observed the dirty rinse water spray up onto CK G's shirt. CK G put together a rack of dirty dishes and tried to push it into the dishwasher. The rack would not budge as the aisle was full and there was no room for dishes to move. CK G washed CK G's hands and went to the clean side to empty a rack of clean dishes to the drying cart. CK G did not have an apron while cleaning dirty dishes, nor did she put a clean one on before handling the clean dishes. CK G touched clean dishes with contaminated clothing.On 9/23/25 at 1:25 PM, Surveyor interviewed CK G who stated CK G has gloves for when CK G cleans dirty dishes. CK G stated CK G just need to wash CK G's hands before putting clean dishes away. On 9/24/25 at 10:22 AM, Surveyor interviewed DM D who stated when doing dishes there should be a clean side and a dirty side. Staff should wash hands before they take clean dishes out of the dishwasher; it should be same with kitchenettes. DM D stated one person should not be doing both washing of dishes and putting clean away at the same time; it might cause cross contamination. DM D stated DM D's expectation is that staff do not have to wear gloves when doing dirty dishes; they must wash their hands before they handle clean dishes and wear a hair net obviously. DM D stated yes, DM guesses there would be risk for cross contamination if clothes got dirty doing dishes and then you went and cooked or put away clean dishes. |

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| F 0759<br><br>Level of Harm - Minimal harm or potential for actual harm<br><br>Residents Affected - Few | Ensure medication error rates are not 5 percent or greater.<br><br>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview and record review, the facility did not ensure its medication error rate was less than 5%. The facility medication error rate was 5.88%.Licensed Practical Nurse (LPN) C administered insulin in deltoid muscle instead of subcutaneous tissue per physician order.According to Diabetes Strong article, dated 07/02/24, indicated, Why it matters where you inject your insulin. Insulin is designed to be injected (or delivered via an insulin pump) into body fat - also known as subcutaneous tissue. The rate at which your insulin is absorbed is largely based on the assumption that it's being injected into fat, rather than muscle. When a pharmaceutical company tells you that the onset of your Novolog or Humalog insulin is 15 minutes, for example, that is based on when it is injected into body fat. The peak of its efficacy and the duration of it staying in your bloodstream also depends on it being injected into body fat - not muscle. R17 was admitted to the facility on [DATE] with diagnoses that include type 2 diabetes mellitus. R17's physician's orders stated, Insulin Glargine 100/UNIT/ML 14 units sub-Q daily and Novolog (Aspart) 100 unit/ml inject variable doses (per sliding scale) sub-Q three times a day. On 09/23/25 at 7:19 AM, Surveyor observed LPN C administer Lantus (glargine) insulin 14 units in the left deltoid muscle and Aspart insulin 2 units into the right deltoid muscle of R17. On 09/23/2025 at 11:46 AM, Surveyor interviewed Director of Nursing (DON) B and asked where on the body staff would be expected to administer insulin. DON B stated it should be in the fattier subcutaneous areas. DON B was informed of the observation and stated, It is not our typical practice to administer insulin in the deltoid region. The nurse did not follow standards of practice. |