

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  525475	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  07/01/2025
NAME OF PROVIDER OR SUPPLIER  River's Bend Health Services		STREET ADDRESS, CITY, STATE, ZIP CODE  960 S Rapids Rd Manitowoc, WI 54220	

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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>Based on observation, staff interview, and record review, the facility did not provide a safe, clean, comfortable, and home-like environment for 1 resident (R) (R3) of 3 sampled residents. The facility did not ensure dirt, debris, food, and spills on R3's floor were cleaned in a timely manner. Findings include:</p> <p>The facility's Resident/Patient Room Cleaning policy, dated 2/1/25, indicates: (The facility's contracted company) is committed to providing a safe, clean, and hygienic environment for residents, staff, and visitors in accordance with regulatory guidance and industry best practices. This policy applies to all environmental services staff under the direction of (the contracted company) and supplements facility policies only where (the contracted company) has assumed responsibility for environmental services operations Floors will be dust mopped, then damp mopped, and any carpet vacuumed in a manner consistent with accepted infection control practices .</p> <p>On 7/1/25, Surveyor reviewed R3's medical record. R3 had diagnoses including dementia, end-stage renal disease on hemodialysis, heart failure with pericardial effusion, chronic obstructive pulmonary disorder (COPD), and anxiety. R3's Minimum Data Set (MDS) assessment, dated 6/5/25, had a Brief Interview for Mental Status (BIMS) score of 13 out of 15 which indicated R3 had intact cognition. R3 had an activated healthcare decision maker.</p> <p>R3's medical record indicated R3 had five falls since 3/28/25 with falls due to weakness during self-transfers.</p> <p>A care plan, dated 6/5/25, indicated R3 required the assistance of one staff for all transfers.</p> <p>On 7/1/25 at 9:40 AM, Surveyor interviewed Housekeeper (HSK)-E who indicated spills and sticky floors can be environmental hazards. HSK-E indicated if there is a spill or sticky floor in a resident's room, the floor should be mopped. HSK-E indicated the Supervisor should be notified of all concerns. HSK-E indicated HSK-E had been employed for a few months and received education during orientation.</p> <p>On 7/1/25 at 9:50 AM, Surveyor interviewed HSK-F who indicated environmental hazards include spills on the floor. HSK-F indicated HSK-F mops the floor if there is anything on it, moves clutter if there is clutter in the pathway of a resident, and reports all concerns to the Supervisor. HSK-F indicated HSK-F received education on environmental hazards and sticky floors in January of 2025 and participates in yearly in-services to complete environmental cleaning tasks.</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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 7/1/25, at 10:10 AM, Surveyor interviewed R3 who indicated housekeeping staff do not clean R3's room daily and indicated staff should mop every day but have not in the last week. R3 indicated R3's floor was sticky and stated R3 heard Surveyor's shoes stick to the floor. Surveyor noted R3's floor felt sticky and contained multiple brown colored stains, dirt and debris near R3's bed, and dark brown dirt debris in the corner of the room, near the door, and behind R3's recliner. R3 pointed to the floor near the bed and under the bedside table and stated, This food spill has been here for several days.</p> <p>On 7/1/25 at 10:56 AM, Surveyor observed HSK-D mop R3's floor. Surveyor interviewed HSK-D who indicated residents' rooms and bathrooms are mopped at least three times per week or more if there is visible dirt. HSK-D indicated sticky floors can be a hazard and that cannot happen. HSK-D indicated HSK-D receives a check off sheet every day that indicates which rooms need to be mopped or deep cleaned. KSK-D checks off the items when completed.</p> <p>On 7/1/25 at 12:37 PM, Surveyor interviewed R3 and noted R3's floor contained the same brown colored spills near the bed. Surveyor also noted the floor was still sticky and Surveyor's shoes stuck to the floor when Surveyor walked in the room. R3 indicated HSK-D mopped the floor but did not move any items or mop behind the recliner or under the bed. R3 then moved the bedside table to show Surveyor that the floors were still in the same condition. R3 indicated housekeeping staff do not do a thorough job and R3 would appreciate it if they moved items and fully cleaned the floor so it is not dirty, sticky, and unsanitary.</p> <p>On 7/1/25 at 1:30 PM, Surveyor interviewed Certified Nursing Assistant (CNA)-G who indicated residents' floors should never be left unclean, sticky, or with spills. CNA-G indicated CNA-G received training on environmental hazards upon hire and had not observed any unclean floors.</p> <p>On 7/1/25 at 1:35 PM, Surveyor interviewed CNA-H who indicated residents' floors should be clean. CNA-H indicated if a resident's floor is dirty or sticky, nursing or housekeeping staff are made aware. CNA-H indicated if no one is available, CNAs clean the floors to ensure residents are safe from environmental hazards. CNA-H indicated CNA-H received training on environmental hazards upon hire.</p> <p>On 7/1/25 at 1:40 PM, Surveyor interviewed Housekeeping Manager (HSKM)-C in R3's room. HSKM-C observed R3's floor and indicated the floor was not cleaned per the company's policy or training. HSKM-C stated housekeepers are trained and expected to move furniture or items in the room, including bedside tables, as well as dry mop and wet mop the floor, including behind recliners and under beds. HSKM-C indicated R3's floor was sticky and verified the floor contained dirt, debris, and spills. HSKM-C indicated the floor needed to be redone because it was not cleaned to expectations.</p>		