

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 525525	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/28/2025
NAME OF PROVIDER OR SUPPLIER Prairie Maison		STREET ADDRESS, CITY, STATE, ZIP CODE 700 South Fremont Prairie Du Chien, WI 53821	

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 - Some</p>	<p>Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.</p> <p>29360</p> <p>Based on interview and record review, the facility did not ensure that all alleged violations involving abuse, neglect, exploitation, or mistreatment, are reported immediately to the administrator of the facility and to other officials, including the State Survey Agency, in accordance with State law through established procedures for 5 of 6 residents (R1, R2, R10, R11 and R12) reviewed for abuse.</p> <p>Facility did not report an allegation of R1 watching child pornography on his cell phone and offering to show the child pornography to R2 to State Survey Agency or Law Enforcement.</p> <p>R10 reported hearing a staff member yelling at another resident and the facility did not report the incident to the state agency.</p> <p>R11 reported that a staff member told her not to use her call light so much and the facility did not report the incident to the state agency.</p> <p>R12 reported that the nurse would not give her a pain pill and the facility did not report the incident to the state agency.</p> <p>Evidenced by:</p> <p>The facility's Abuse, Neglect, Exploitation or Misappropriation Reporting and Investigation policy, dated 1/25, includes, in part, the following: Reporting Allegations to the Administrator and Authorities. 1. If resident abuse, neglect, exploitation, misappropriation of resident property or injury of unknown source is suspected, the suspicion must be reported immediately to the administrator and to other officials according to state law. 2. The administrator or the individual making the allegation immediately reports his or her suspicion to the following persons or agencies: a. The state licensing/certification agency responsible for surveying/licensing the facility; e. Law enforcement officials.</p> <p>Example 1</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 - Some</p>	<p>On 4/28/25, Surveyor reviewed facility grievance log. Grievance log from 4/15/25 states in part . R2 does not care for R1. R2 gets annoyed when he can hearing [sic] R1 laughing in the hallway. R2 has accused R1 of watching child porn because R2 states he saw him watch it. Staff have not seen/heard of this happening. R2 has been offered a different room multiple times and denies.</p> <p>On 4/28/25 at 1:40 PM Surveyor interviewed NHA A (Nursing Home Administrator). Surveyor asked NHA A if she was aware of the allegation of R1 watching child pornography. NHA A stated she was aware but could not confirm it after talking with staff. Surveyor asked NHA A if the allegation was reported to State Survey Agency or Law Enforcement. NHA A stated no, the allegation was not reported but should have been reported to both agencies.</p> <p>39713</p> <p>Example 2</p> <p>On 4/28/25, Surveyor reviewed facility grievance log. Grievance log dated 1/29/25, lists concern voiced by R10. R10 stated she witnessed a staff member yelling at another resident in the dining room and pointing in her face that she shouldn't be trying to help another resident. R10 thought the staff member looked aggressive and found the situation unnecessary.</p> <p>This incident was not reported to the appropriate agencies.</p> <p>Example 3</p> <p>On 4/28/25, Surveyor reviewed facility grievance log. Grievance log dated 2/19/25, lists concern voiced by R11. R11 stated, last night a staff member told her that she shouldn't put her light on so much and she should just yell for her. R11 said she had went [sic] the bathroom and couldn't go so a couple of hours later she had to go again and that is when this staff told her this.</p> <p>This incident was not reported to the appropriate agencies.</p> <p>Example 4</p> <p>On 4/28/25, Surveyor reviewed facility grievance log. Grievance log dated 4/11/25, lists concerns voiced by R12. R12 reported that the previous night [sic] would never come to give her a pain pill and then she couldn't sleep.</p> <p>This incident was not reported to the appropriate agencies.</p> <p>On 4/28/25 at 1:40 PM Surveyor interviewed NHA A. Surveyor asked NHA A if grievances should be reported. NHA A stated all grievances should be reported to the appropriate agency if they meet the reporting requirements.</p>		

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<p>F 0610</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Respond appropriately to all alleged violations.</p> <p>29360</p> <p>Based on interview and record review, the facility did not have evidence that all alleged violations of abuse were thoroughly investigated for 5 of 6 residents (R1, R2, R10, R11, and R12) reviewed for abuse.</p> <p>Facility did not fully investigate an allegation of R1 watching child pornography.</p> <p>R10 reported hearing a staff member yelling at another resident. The facility did not fully investigate the incident and put protections in place.</p> <p>R11 reported that a staff member told her not to use her call light so much. The facility did not fully investigate the incident.</p> <p>R12 reported that the nurse would not give her a pain pill. The facility did not fully investigate the incident.</p> <p>Evidenced by:</p> <p>The facility's Abuse, Neglect, Exploitation or Misappropriation Reporting and Investigation policy, dated 1/25, includes, in part, the following: Reporting Allegations to the Administrator and Authorities. Investigating Allegations. 1. All allegations are thoroughly investigated. The administrator initiates investigations.</p> <p>Example 1</p> <p>On 4/28/25, Surveyor reviewed the facility grievance log. Grievance log from 4/15/25 states in part . R2 does not care for R1. R2 gets annoyed when he can hearing [sic] R1 laughing in the hallway. R2 has accused R1 of watching child porn because R2 states he saw him watch it. Staff have not seen/heard of this happening. R2 has been offered a different room multiple times and denies.</p> <p>On 4/28/25 at 1:40 PM Surveyor interviewed NHA A (Nursing Home Administrator). Surveyor asked NHA A if the allegation that R1 was watching child pornography had been fully investigated. NHA A stated no, it had not been investigated. Surveyor asked NHA A if the allegation should have been investigated. NHA A stated yes. Surveyor asked NHA A if grievances should be fully investigated. NHA A stated yes, grievances should be fully investigated as per policy.</p> <p>39713</p> <p>Example 2</p> <p>On 4/28/25, Surveyor reviewed the facility grievance log. Grievance log lists concern voiced by R10. R10 stated she witnessed a staff member yelling at another resident in the dining room and pointing in her face that she shouldn't be trying to help another resident. R10 thought the staff member looked aggressive and found the situation unnecessary.</p> <p>(continued on next page)</p>

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<p>F 0610</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>The facility's investigation did not included interviews from staff who worked, no other residents were interviewed, and there were no assessments of other resident in the facility to ensure they felt safe and had no abuse concerns. The facility also did not contact the police or complete any follow up with R10 after the incident.</p> <p>Example 3</p> <p>On 4/28/25, Surveyor reviewed the facility grievance log. Grievance log lists concern voiced by R11. R11 stated, last night a staff member told her that she shouldn't put her light on so much and she should just yell for her. R11 said she had went the bathroom and couldn't go so a couple of hours later she had to go again and that is when this staff told her this.</p> <p>The facility's investigation did not included interviews from staff who worked, no other residents were interviewed, and there were no assessments of other resident in the facility to ensure cares are being met. The facility also did not contact the police or complete any follow up with R10 after the incident.</p> <p>Example 4</p> <p>On 4/28/25, Surveyor reviewed the facility grievance log. Grievance log lists concerns voiced by R12. R12 reported that the previous night [sic]would never come to give her a pain pill and then she couldn't sleep.</p> <p>The facility's investigation did not included interviews from staff who worked, no other residents were interviewed, education provided to staff accused staff only, and there were no assessments of other resident in the facility to ensure they were receiving medications requested and ordered.</p> <p>On 4/28/25 at 1:40 PM Surveyor interviewed NHA A (Nursing Home Administrator). Surveyor asked NHA A if grievances should be fully investigated. NHA A stated yes, grievances should be fully investigated as per policy.</p> <p>The facility failed to thoroughly investigate alleged violations of abuse.</p>		