

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 525533	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/08/2025
NAME OF PROVIDER OR SUPPLIER Waterfall Health of Algoma		STREET ADDRESS, CITY, STATE, ZIP CODE 1510 Fremont St Algoma, WI 54201	

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 0690</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections.</p> <p>47248</p> <p>Based on observation, staff and resident interview, and record review, the facility did not ensure 1 resident (R) (R87) of 2 sampled residents received appropriate care and services to prevent urinary tract infections (UTIs).</p> <p>The facility did not ensure R87 received catheter care in a manner that decreased the risk of infection. On 1/7/25, R87's uncovered catheter drainage bag was observed on the floor of R87's room.</p> <p>Findings include:</p> <p>The facility's Catheter Care, Urinary policy, dated 11/2023, indicates: The purpose of this procedure is to prevent urinary catheter-associated complications, including urinary tract infections .Infection Control: .2. Be sure the catheter tubing and drainage bag are kept off the floor .</p> <p>On 1/6/25, Surveyor reviewed R87's medical record. R87 had diagnoses including pneumonia, diabetes mellitus type 2, and urinary catheter with benign prostatic hyperplasia. R87's Minimum Data Set (MDS) assessment, dated 1/3/25, had a Brief Interview for Mental Status (BIMS) score of 13 out of 15 which indicated R87 was not cognitively impaired.</p> <p>On 1/7/25 at 9:15 AM, Surveyor observed R87 in a recliner. Surveyor noted R87's catheter bag was not covered with a dignity bag and was in contact with the floor under the recliner.</p> <p>On 1/7/25 at 9:24 AM, Surveyor observed Certified Nursing Assistant (CNA)-C provide catheter care for R87. Following the observation, Surveyor interviewed R87 who indicated staff assisted with transferring R87's catheter bag from the other side of the bed so R87 could transfer from the bed to the recliner. R87 indicated an unknown staff placed R87's catheter bag on the floor. Surveyor interviewed CNA-C who indicated R87's catheter bag should not be on the floor and should be placed in a dignity bag and hung below the level of R87's bladder. CNA-C indicated CNA-C did not know who assisted R87 with the transfer.</p> <p>On 1/8/25 at 11:05 AM, Surveyor interviewed Director of Nursing (DON)-B who confirmed catheter bags should be hung below the level of the bladder and should not touch the floor.</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 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49010</p> <p>Based on observation, staff and resident interview, and record review, the facility did not ensure food was served at a palatable temperature for 4 residents (R) (R24, R32, R87, and R239) of 14 sampled residents.</p> <p>R24, R32, R87, and R239 indicated hot food was not always served hot. During the breakfast meal on 1/7/25, food items were not served at a palatable temperature.</p> <p>Findings include:</p> <p>The facility served residents in the dining room as well as on individual room trays. Surveyor twice requested the facility's policy on meal serving/food temperatures. A policy was not provided.</p> <p>The U.S. Food and Drug Administration (FDA) provides guidelines for cooking and serving temperatures to ensure food safety. According to the 2022 FDA Food Code, the following minimum internal temperatures should be achieved when cooking various foods:</p> <ul style="list-style-type: none"> ~ Poultry (whole, pieces, or ground): 165 Fahrenheit (F) (74 Celsius (C)) for at least 15 seconds ~ Ground meats (beef, pork, other than poultry): 155 F (68 C) for at least 15 seconds ~ Seafood (fish, shellfish, and crustaceans): 145 F (63 C) for at least 15 seconds ~ Eggs: For immediate service: 145 F (63 C) for at least 15 seconds; Hot-held for service: 155 F (68 C) for at least 15 seconds. ~ Roasts (beef, pork, veal, lamb): 145 F (63 C) for at least 4 minutes ~ Fruits and vegetables cooked for hot holding: 135 F (57 C) <p>The temperatures are designed to reduce the risk of foodborne illnesses by ensuring harmful pathogens are destroyed during cooking.</p> <p>1. From 1/6/25 to 1/7/25, Surveyor reviewed R24's medical record. R24 was admitted to the facility on [DATE]. R24's Minimum Data Set (MDS) assessment, dated 1/3/25, had a Brief Interview for Mental Status (BIMS) score of 5 out of 15 which indicated R24 was severely cognitively impaired.</p> <p>On 1/7/25 at 8:23 AM, Surveyor interviewed R24 who indicated R24's breakfast and coffee were cold. R24 also stated breakfast was served late. R24 indicated breakfast isn't always hot and reported the cold meal and coffee to staff. R24 told staff that morning time was R24's best time of day and R24's best time was ruined because of the cold food.</p> <p>(continued on next page)</p>		

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<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 1/7/25 at 8:29 AM, Surveyor interviewed Dietary Manager (DM)-D who indicated breakfast was usually served at 7:30 AM, however, kitchen staff were running late because the dining room was reopened that morning without appropriate communication with the kitchen. DM-D stated room trays were delivered at 7:55 AM. When asked why the trays had not yet been delivered to all residents, DM-D indicated kitchen staff brought the food out on a cart and Certified Nursing Assistants (CNAs) and nurses were responsible for delivering residents' trays. DM-D indicated DM-D did not know why it took the CNAs and nurses so long to deliver food trays but it happened often. DM-D indicated food was temped in the kitchen before it was delivered to ensure the food was hot and within an acceptable temperature range. DM-D stated there was a resident concern that meal trays got cool while waiting too long to be served/delivered the day prior. DM-D confirmed residents' food should be served at a palatable temperature.</p> <p>On 1/7/25 at 8:33 AM, Surveyor interviewed Director of Nursing (DON)-B who stated DON-B did not know why breakfast trays were still being delivered and indicated the process usually went quicker. DON-B stated meal delivery took longer because staff had to don and doff gowns, gloves, and masks to deliver food trays due to illness. When asked if the food was still hot, DON-B was not sure.</p> <p>On 1/7/25 at 4:07 PM, Surveyor interviewed Nursing Home Administrator (NHA)-A who indicated NHA-A expects kitchen staff to follow the kitchen's policies regarding preparing, temping, and serving food.</p>

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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>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>49010</p> <p>Based on observation, staff interview, and record review, the facility did not ensure food was stored and prepared in a sanitary manner. This practice had the potential to affect all 34 residents residing in the facility.</p> <p>The facility did not store food in a manner to ensure food safety and did not use proper food dating practices.</p> <p>The facility did not follow safe food cooling protocols.</p> <p>Findings include:</p> <p>On 1/6/25 at 8:44 AM, Surveyor interviewed Dietary Manager (DM)-D who was unsure which food code the facility followed. DM-D conferred with the facility's Registered Dietician (RD) and then indicated to Surveyor that the facility followed the Federal Food and Drug Administration (FDA) Food Code.</p> <p>Food Labeling/Storage:</p> <p>The facility's Food Receiving and Storage policy, revised November 2024, indicates: Food shall be received and stored in a manner that complies with safe food handling practices .Dry Storage: .4. Dry foods that are stored in bins and removed from the original packaging, labeled and dated (use by date) . Refrigerated/Frozen Storage: 1. All foods in the refrigerator or freezer are covered, labeled, and dated (use by date).</p> <p>The 2022 FDA Food Code documents at 3-501.17 Ready-to-Eat, Time/Temperature Control for Safety Food (TCS), Date Marking: (A) Except when packaging food using a reduced oxygen packaging method as specified under S 3-502.12, and except as specified in (E) and (F) of this section, refrigerated, ready-to-eat, time/temperature control for safety food prepared and held in a food establishment for more than 24 hours shall be clearly marked to indicate the date or day by which the food shall be consumed on the premises, sold, or discarded when held at a temperature of 5 C (Celsius) (41 F) (Fahrenheit) or less for a maximum of 7 days. The day of preparation shall be counted as day 1.</p> <p>The 2022 FDA Food Code documents at 3-501.18 Ready-to-Eat, Time/Temperature Control for Safety Food, Disposition: (A) A food specified in 3-501.17(A) or (B) shall be discarded if it: (1) Exceeds the temperature and time combination specified in 3-501.17(A), except time that the product is frozen; (2) Is in a container or package that does not bear a date or day; or (3) Is inappropriately marked with a date or day that exceeds a temperature and time combination as specified in 3-501.17(A).</p> <p>During an initial kitchen tour that began at 8:44 AM on 1/6/25, Surveyor and DM-D observed the following items in the cooler, freezer, and dry storage areas:</p> <p>Cooler:</p> <p>~ Various half sandwiches dated 1/4/25 with no use by dates</p> <p>(continued on next page)</p>		

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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>~ A tray of individual servings of pears dated 1/5/25 with no use by dates</p> <p>~ Four sour cream cups dated 12/23/24 with no use by dates</p> <p>~ A one half-full 5-pound bag of shredded cheddar cheese dated 1/3/25 with no use by date</p> <p>~ A one third-full 5-pound bag of shredded parmesan cheese with no open or use by dates</p> <p>Freezer:</p> <p>~ Cooked cheese pizza slices individually wrapped and dated 1/1/24 with no use by dates</p> <p>~ A pan of brownies dated 12/31/24 with no use by date</p> <p>~ A container of stroganoff dated 12/20/24 with no use by date</p> <p>~ A container of pizza sauce dated 1/1/25 with no use by date</p> <p>~ A container of cooked ground beef dated 12/15 with no use by date</p> <p>~ A container of cooked ground beef dated 12/19/24 with no use by date</p> <p>~ A container of cooked Italian sausage dated 12/26/24 with no use by date</p> <p>~ Cooked pork cutlets dated 12/19/24 with no use by date</p> <p>Dry Storage:</p> <p>~ A container of bulk sugar dated 11/8/24 with no use by date</p> <p>~ A container of bulk flour dated 10/24/24 with no use by date</p> <p>~ A one third-full bag of penne pasta with a received date (per DM-D) of 10/24/24 and no open or use by dates</p> <p>~ A one third-full bag of elbow pasta with a received date (per DM-D) of 12/10/24 and no open or use by dates</p> <p>~ A three quarters-full bag of rotini pasta with a received date (per DM-D) of 12/27/24 and no open or use by dates</p> <p>~ A container of Corn Flakes with a received date (per DM-D) of 10/18/24 and no open or use by dates</p> <p>~ A container of Raisin Bran with an open date (per DM-D) of 1/5/25 and no use by date</p> <p>~ A container of crisp rice cereal with a received date (per DM-D) of 11/5/24 and no open or use by dates</p> <p>(continued on next page)</p>		

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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>~ A package of dry powder identified as brown gravy mix (per DM-D) with an open date (per DM-D) of 12/30/24 and no use by date</p> <p>~ A package of bread crumbs with a received date (per DM-D) of 11/27/24 and no open or use by dates</p> <p>Surveyor interviewed DM-D who indicated DM-D was unaware of a food dating policy and indicated DM-D did not know specific dates of how long food could be stored in the refrigerator, freezer, or dry storage. DM-D was unaware that open and/or cooked food should contain use by dates. DM-D stated DM-D was not aware of the facility's policy for how long to store cooked and open food. DM-D asked Surveyor how long to store food, how to date food, how to write a policy for storing food, and where someone finds food storage information.</p> <p>On 1/7/25 at 3:32 PM, Surveyor interviewed [NAME] (CK)-E who was unclear on how long items should be stored. CK-E stated many items in the refrigerator were kept for three days, however, CK-E could not specify how long open dry goods and freezer items should be stored. CK-E was not aware of a policy that contained specifics on food storage, but thought CK-E may have received training after CK-E was hired.</p> <p>On 1/7/25 at 3:40 PM, Surveyor interviewed Dietary Aide (DA)-F who was unclear on the facility's dating policy for food storage. DA-F indicated DA-F dated foods when they were received but did not know the use by dates. DA-F was unaware of a food dating policy.</p> <p>Cooling Temperatures:</p> <p>The facility's Food Receiving and Storage policy, revised November 2024, indicates: Food shall be received and stored in a manner that complies with safe food handling practices .Danger Zone means temperatures above 41 degrees Fahrenheit (F) and below 135 degrees F that allow the rapid growth of pathogenic microorganisms that cause foodborne illness. Potentially Hazardous Food (PHF) or Time/Temperature Control for Safety (TCS) Foods held in the danger zone for more than 4 hours (if being prepared from ingredients at ambient temperature) or six hours (if cooked and cooled) may cause foodborne illness outbreak if consumed .</p> <p>The 2022 FDA Food Code documents at 3-501.14 Cooling: (A) Cooked time/temperature control for safety food shall be cooled: (1) Within 2 hours from 57 Celsius (C) (135 Fahrenheit (F)) to 21 C (70 F); and (2) Within a total of 6 hours from 57 C (135 F) to 5 C (41 F) or less. (B) Time/temperature control for safety food shall be cooled within 4 hours to 5 C (41 F) or less.</p> <p>The 2022 FDA Food Code documents at section 3-501.15 Cooling Methods: (A) Cooling shall be accomplished in accordance with the time and temperature criteria specified under S 3-501.14 by using one or more of the following methods based on the type of food being cooled: (1) Placing the food in shallow pans; (2) Separating the food into smaller or thinner portions; (3) Using rapid cooling equipment; (4) Stirring the food in a container placed in an ice water bath; (5) Using containers that facilitate heat transfer; (6) Adding ice as an ingredient; or (7) Other effective methods.</p> <p>(continued on next page)</p>		

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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>During an initial kitchen tour that began at 8:44 AM on 1/6/25, Surveyor observed the facility's food cooling logs with DM-D. The cooling logs contained food items and dates. There was a column for the final cooking temperature and a header column that stated 135 degrees to 70 degrees in 2 hours. Under the header column were three additional columns to record cooling temperatures and times which stated cool start, 1 hour, and 2 hour. A second header column stated 70 degrees to 41 degrees F in 4 hours under which there were 4 columns marked 3 hour, 4 hour, 5 hour, and 6 hour for staff to record times and cooling temperatures at those markers. Surveyor reviewed 6 pages of cooling log entries with DM-D. There were 50 food entries on the logs. Of the 50 entries, 6 items were cooled to 41 degrees or less within the 6-hour time frame. The other 44 entries were either not completed, contained blank spots, or contained temperatures on each entry that were well above 70 degrees in two hours and/or above 41 degrees in 6 hours.</p> <p>Surveyor interviewed DM-D who indicated food should be between 135 and 70 degrees F in the first two hours. DM-D was not aware food items should be 60 degrees F or less in the first two hours and 41 degrees F or less in a 6-hour time frame. DM-D indicated DM-D must have misunderstood the cooling log directions. DM-D indicated DM-D and others should have filled out the cooling logs via the proper cool down to 41 degrees within 6 hours.</p> <p>On 1/7/25 at 3:32 PM, Surveyor interviewed CK-E who was unable to correctly identify food cooling steps or appropriate food cooling temperatures. CK-E indicated food should cool on the counter for a couple of hours with the lid ajar and be refrigerated when it is under 100 degrees. CK-E indicated CK-E was aware of and had used food cooling logs.</p> <p>On 1/7/25 at 4:07 PM, Nursing Home Administrator (NHA)-A indicated NHA-A expects kitchen staff to know appropriate food storage and food cooling procedures.</p>