

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  525641	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  05/01/2024
NAME OF PROVIDER OR SUPPLIER  Aspirus Care & Rehab-Medford		STREET ADDRESS, CITY, STATE, ZIP CODE  135 S Gibson St Medford, WI 54451	

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>46694</p> <p>Based on observation, staff interview and record review, the facility did not prepare distribute and serve food in accordance with professional standards for food service safety. This had the potential to affect 21 of 22 residents within the facility.</p> <p>Findings:</p> <p>Glove use</p> <p>The Wisconsin Food Code states in part, Applicability and Terms Defined 1?201.10 Statement of Application and Listing of Terms . Food-contact surface means: . (b) Onto a surface normally in contact with food.</p> <p>4-904.11 Kitchenware and Tableware. (A) Single-service and single-use articles and cleaned and sanitized utensils shall be handled, displayed, and dispensed so that the contamination of food- and lip- contact surfaces is prevented.</p> <p>Facility's policy titled, Grooming and Personal Health revised 8/23, states in part: .Use tongs, spoons and forks when preparing foods rather than hands whenever possible. Wear sanitary disposable gloves if direct contact of food is necessary.</p> <p>On 04/30/24 at 11:42 AM, Surveyor observed Dietary Aide (DA) D serve hot food to plates with gloved hands. DA D leaned left gloved hand onto the service counter. DA D rested right gloved hand onto the counter. DA D grabbed a plate from plate warmer with contaminated gloved hand touching the food contact surface. DA D placed a piece of chicken onto cutting board with left contaminated gloved hand and cut the chicken in half. DA D put the half of chicken into the hot serve area with same gloved hand. DA D wiped gloves with a dry towel that was lying on the food service counter. DA D then rested both gloved hands on service counter. DA D took a plate holding a cold sandwich from other dietary aide and placed it on the tray and DA D told dietary staff, This one needs mayo. DA D picked up another plate from the warmer touching food contact surface.</p> <p>On 04/30/24 at 12:05 PM, Surveyor interviewed DA D regarding observations of contaminated gloves touching chicken and food contact surfaces. DA D replied, I know that I should have used the tongs for the chicken. I was just nervous.</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 04/30/24 at 12:06 PM, Surveyor interviewed Dietary Manager (DM) C about observations made during hot food service with DA D. DM C replied, I'm thinking that I have to have the staff serve barehanded, so they know to use tongs for everything they touch.</p> <p>Sanitizer Bucket Logs</p> <p>The Wisconsin Food Code documents at 4-501.116 Ware washing Equipment, Determining Chemical Sanitizer Concentration. Concentration of the sanitizing solution shall be accurately determined by using a test kit or other device.</p> <p>On 04/30/24 at 12:07 PM, DM C showed the sanitization bucket log to Surveyor. Surveyor asked DM C, How often is the log supposed to be documented? DM C replied, The log is supposed to be completed daily. Surveyor informed DM C that there are dates missing from the log and asked for previous logs. Surveyor followed DM C into the office. DM C handed Surveyor logs back to 12/02/23 and stated, It looks like we are not doing a very good job of keeping these logs.</p> <p>On 04/30/24 at 12:30 PM, Surveyor reviewed the sanitization bucket log.</p> <p>Dates missing in December 2023 include:</p> <p>4, 5, 6, 7, 8, 9, 10, 13, 14, 15, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30.</p> <p>Dates missing in January 2024 include:</p> <p>3, 4, 6, 7, 8, 10, 11, 14, 15, 16, 19, 20, 21, 26, 27, 28, 29, 30, 31.</p> <p>Dates missing in February 2024 include:</p> <p>2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 13, 14, 16, 17, 18, 20, 21, 22, 25, 26, 27, 28.</p> <p>Dates missing in March 2024 include:</p> <p>1, 2, 3, 5, 6, 7, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 25, 26, 27, 29, 30, 31.</p> <p>Dates missing in April 2024 include:</p> <p>2, 3, 4, 8, 9, 10, 11, 12, 13, 14, 26, 27, 28.</p>

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p>30570</p> <p>Based on observation, record review and interview, the facility did not establish and maintain an infection prevention and control program designed to provide a safe, sanitary and comfortable environment to help prevent the development and transmission of communicable diseases and infections. Staff did not perform hand hygiene when warranted when providing care to 1 of 4 residents (R) R11.</p> <p>This is evidenced by:</p> <p>Example 1</p> <p>Surveyor requested and reviewed the facility policy titled Hand Hygiene Policy with most recent revision dated 03/2024. The policy in part reads:</p> <p>Purpose: To establish procedures for hand hygiene, which will cleanse the hands of contaminates and microorganisms for protection of everyone.</p> <p>General Instructions:</p> <p>Hand hygiene is the single most important means of preventing spread of infection.</p> <p>Perform hand hygiene with soap and water or alcohol based hand rub for at least twenty seconds:</p> <p>Before direct contact with patients</p> <p>Before donning gloves</p> <p>After contact with inanimate objects (including medical equipment) in the immediate vicinity of the patient.</p> <p>After contact with the patients intact skin.</p> <p>Surveyor reviewed R11's most recent Significant Change in Status Minimum Data Set (MDS) completed 4/09/24 and noted R11 is dependent on staff for eating, dressing and bed mobility of rolling. R11 is always incontinent of bladder and bowel.</p> <p>On 4/29/24 at 12:37 PM, Surveyor observed Certified Nursing Assistant (CNA) G wash her hands in the dining room and obtain R11's lunch tray to take to R11's room. Once at R11's room CNA H donned a gown and gloves to enter resident room with her lunch tray. CNA G placed R11's lunch tray on her bed side table and raised R11's head of her bed. CNA G placed R11's glasses on resident and placed a towel around resident neck. CNA G brought a chair and bedside table to R11's bed and proceeded to end of bed to raise R11's bed further. CNA G raised R11's bedside table and proceeded to provide R11 drinks of liquids via a glass and attempted to feed R11 foods via a spoon. CNA G wiped R11's lips with a wet cloth and provided R11 cues to swallow. CNA G did not remove her gloves, perform hand hygiene and don clean gloves after touching R11's bed, R11's glasses, the chair in R11's room and the bedside table in R11's room and proceeded to assist R11 with eating.</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 - Few</p>	<p>On 5/01/24 at 9:06 AM, Surveyor interviewed CNA G about the observation. CNA G expressed CNA G didn't think about it, but should wash her hands after touching anything dirty and before helping R11 eat. CNA G further expressed it is important because those items are dirty, and you should wash hands before helping residents eat.</p> <p>Example 2</p> <p>On 04/30/24 at 7:47 AM, Surveyor observed CNA H assist R11 with morning care. CNA H is associated with R11's hospice service. CNA H donned a gown and gloves before entering R11's room without performing hand hygiene. CNA H went to R11's sink in her bathroom to turn on water by the faucet handles with same gloved hands. CNA H returned to R11's bed and adjusted R11's bed height with same gloved hands. CNA H went to R11 and rubbed her shoulder while talking with her. CNA H returned to the bathroom to adjust the water temperature by faucet handles with same gloved hands. CNA H went to R11's wardrobe closet and obtained clean clothes and returned to bedside to talk with resident touching her shoulders again. CNA H went back to the closet for more clothes and proceeded to the bathroom for basin and clean washcloths. CNA H returned to bed and adjusted bed height more. CNA H uncovered R11, removed pillows from in front and behind resident and placed the pillows on a chair in room. CNA H rolled R11 to back with pad that was under R11. CNA H removed heel device from under R11's legs and proceeded to assist R11 with undressing and removing cloths that were rolled into palms of R11's hands. CNA H removed R11's hospital gown and t-shirt. CNA H washed and dried R11's face, hands and underarms. CNA H applied lotion and hisop oil to R11 and proceeded to R11's dresser for clean t-shirt and clean socks. CNA H did not remove her gloves, perform hand hygiene and don clean gloves at any point after touching various presumably dirty items in R11's room or after washing R11. CNA H returned to R11 to don clean t-shirt and shirt. CNA H rolled R11 to window and washed R11's back and pulled down R11's shirts in the back. CNA H placed a clean brief under R11 while she was rolled to window with no change of gloves or hand hygiene. CNA H rolled R11 to her back to wash her peri area. CNA H removed her gloves and used gel on wall for hand hygiene and donned clean gloves. This is the first glove change and hand hygiene since entering R11's room and going from presumably dirty items to clean. CNA H rolled R11 in bed to window. CNA H informed Surveyor the pad underneath R11 is a little wet. CNA H removed the pad and donned a clean brief. CNA H asked R11 if R11 wanted to get up and R11 declined. Registered Nurse (RN) E entered the room to assist CNA H to boost R11 in bed. CNA H removed R11's socks and lotioned her legs. CNA H placed the heels up device on R11's bed, placed R11's legs on device and covered R11 with a sheet.</p> <p>On 4/30/24 at 8:23 AM, Surveyor spoke with CNA H about the observation and the expectation of hand hygiene when going from dirty to clean. CNA H explained CNA H was taught hand hygiene is needed to be done after peri care and denture care but it is Good to know she should perform hand hygiene every time when going from dirty to clean.</p> <p>On 5/01/24 at 10:50 AM, Surveyor spoke with RN I about the observations. RN I is the facility's Infection Control Coordinator. RN I indicated the facility's hand hygiene expectation and policy is based on Centers of Disease Control (CDC) guidelines. CDC guidelines directs staff to remove their gloves, perform hand hygiene and don clean gloves prior to feeding resident. RN I would expect staff to remove gloves, perform hand hygiene whenever touching things in resident room, the patient and equipment that is presumably dirty to prevent cross contamination. Anytime going from dirty to clean.</p>		