

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 525483	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/11/2020
NAME OF PROVIDER OF SUPPLIER ELLSWORTH HEALTH SERVICES		STREET ADDRESS, CITY, STATE, ZIP 403 N MAPLE ST ELLSWORTH, WI 54011	
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)		
F 0609 Level of harm - Minimal harm or potential for actual harm Residents Affected - Few	<p>Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on interview, record review and policy review, the facility did not have evidence that all allegations of abuse or mistreatment to residents were reported in accordance with state survey agency requirements. This occurred for 1 of 3 residents reviewed for abuse, Resident (R)1. R1 alleged she was raped during a hospital admission from facility on [DATE]. The facility did not report the allegation of sexual abuse to the state agency. This is evidenced by: R1 was admitted to the facility [DATE] with a [DIAGNOSES REDACTED]. The most recent Minimum Data Set (MDS) documents a Brief Interview for Mental Status Score of 14, meaning R1 is alert and oriented and able to answer questions. R1 does have an activated power of attorney for health care due to the intellectual disability and poor decision making. Surveyor reviewed the medical record and noted the hospital admission notes include in part, Pt had reported to nurse that she was raped .was able to give some detail as to what happened to her and she reports that two different men had tried to rape me last week. Pt declined for RN to physically examine her and collect evidence .Pt denied that a penis was put inside of her .Pt did report that both men's penis was out of their pants . The hospital filed a vulnerable adult report. On [DATE] at 8:45 a.m., Surveyor asked the Nursing Home Administrator (NHA) and the Director of Nursing (DON) for any self reports that are in progress or abuse investigations. Surveyor was told they do no have any recent investigations. Surveyor reviewed the nurses' notes for any additional information from social services. A note on [DATE] includes in part: Received call from .adult protection .regarding resident and allegations she made while at hospital. Resident has made these allegations in the past in which facility and county launched an investigation. During previous investigation into incident, it was found out that the incident had occurred many years ago and the individual who had sexually assaulted resident is now deceased . Informed adult protective services she has not had any visitors due to Covid -19 .resident has not made these allegations while at the facility since April when writer started position. Writer will look back in notes and see if there is anything that can be reported .at this time social worker at .county and writer agree that it can be assumed the allegations resident made while at hospital are relating to a past experience Social services will continue to monitor situation for any behavior or statements that relate to the situation and will report any findings to the adult protection social worker. No other questions or concerns at this time. Surveyor reviewed the facility policy Abuse Prevention Program dated [DATE] that includes in part: 7. Reporting/Responding .The facility must report alleged violations related to .abuse .and report the results of all investigation to the proper authorities within the prescribed time frames .Results of the investigation will be reported to the state survey agency within 5 working days of the initial allegation . On [DATE] at 1:10 p.m., Surveyor interviewed Social Services Director (SSD) D and asked when the facility was made aware of the incident. SSD D indicated the hospital called the facility on [DATE] and informed the facility. On [DATE] at 1:55 p.m., Surveyor interviewed NHA A and asked if the facility has filed a report with the state agency since being aware of the incident on [DATE]. NHA A stated, No.</p> <p>Respond appropriately to all alleged violations.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on interviews and record review, the facility did not have evidence all allegations of abuse or mistreatments are thoroughly investigated. This occurred for 1 of 3 residents reviewed for abuse, Resident (R) R1. R1 made an allegation of rape. The facility did not do a thorough investigation into the incident. This is evidenced by: R1 was admitted to the facility [DATE] with a [DIAGNOSES REDACTED]. The most recent Minimum Data Set (MDS) documents a Brief Interview for Mental Status Score of 14, meaning R1 is alert and oriented and able to answer questions. R1 does have an activated power of attorney for health care due to the intellectual disability and poor decision making. R1's Care Plan Resident alleged that she was raped prior to entering the care center (first initiated [DATE]). Goal: Resident will feel safe in her environment and free to verbalize thoughts, feelings, and fear as she feels comfortable. Interventions: Social worker will provide support and monitor for signs of anxiety and or depression .A sign will be placed on door directing all visitors to nurses station. All male visitor (except guardian) will need to be supervised .A report was made to county sheriff. . County Human Services, NHA, DON and resident's guardian. (updated [DATE]). This is the date Surveyor was onsite. Surveyor reviewed the medical record and noted the hospital admission notes include in part, Pt had reported to nurse that she was raped .was able to give some detail as to what happened to her and she reports that two different men had tried to rape me last week. Pt declined for RN to physically examine her and collect evidence. Pt denied that a penis was put inside of her .Pt did report that both men's penis was out of their pants . The hospital filed a vulnerable adult report. On [DATE] at 8:45 a.m., Surveyor asked the Nursing Home Administrator (NHA) and the Director of Nursing (DON) for any self reports that are in progress or abuse investigations. Surveyor was told they do no have any recent investigations. On [DATE] at 9:30 a.m., Surveyor interviewed R1 and asked how things were going. R1 said, Not good. Surveyor asked if R1 wanted to talk about it. R1 said, No. R1 stated she was leaving the facility. On [DATE] at 9:40 a.m., Surveyor interviewed Certified Nursing Assistant (CNA) C to ask about any behaviors of R1. CNA C indicated R1 gets upset easily, very emotional and does not like the restrictions of no visitors due to Covid. CNA C stated that R1's roommate passed away a few months ago and since then R1 is very emotional. Surveyor asked if R1 has made any allegations of sexual abuse. CNA C stated, No. Surveyor reviewed the nurses' notes for any additional information from social services. A note on [DATE] includes in part: Received call from .adult protection .regarding resident and allegations she made while at hospital. .Resident has made these allegations in the past in which facility and pierce county launched an investigation. During previous investigation into incident, it was found out that the incident had occurred many years ago and the individual who had sexually assaulted resident is now deceased . Informed adult protective services she has not had any visitors due to Covid -19 .resident has not made these allegations while at the facility since April when writer started position. Writer will look back in notes and see if there is anything that can be reported .at this time social worker at .county and writer agree that it can be assumed the allegations resident made while at hospital are relating to a past experience .Social services will continue to monitor situation for any behavior or statements that relate to the situation and will report any findings to the adult protection social worker. No other questions or concerns at this time. On [DATE] at 1:10 p.m., Surveyor interviewed Social Services Director (SSD) D asking what SSD D was aware of about R1's allegations. SSD D indicated the hospital had called and talked with SSD D most likely on [DATE]. SSD D stated the hospital told the facility a report had been filed with adult protective services. Surveyor asked what happened after that. SSD D stated that on [DATE] the county Social Worker called to go over the case. The worker had a similar case from this resident from approximately 1 year ago. SSD D stated she looked back in R1's record and could see no visitors have been allowed in that could have done anything due to Covid restrictions. SSD D stated the county social worker was going to call the Power of Attorney. SSD D stated she has not heard anything back at</p>		
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE	

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.

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F 0610 Level of harm - Minimal harm or potential for actual harm Residents Affected - Few	<p>(continued... from page 1)</p> <p>this point. SSD D stated that she and the county social worker agreed it was most likely trauma being brought up from the past due to the surgery at the hospital. Surveyor asked if the facility had interviewed the resident. SSD D stated she has worked at the facility for two months. R1 is very particular about who she talks to. SSD D is told to leave the room after one or two sentences. Surveyor asked if the facility interviewed other alert and oriented female residents for any misconduct occurring. SSD D stated no. Surveyor asked if the facility had interviewed staff to see if they heard or saw anything, or if R1 had reported this to other staff. SSD D stated, No, we are starting the interviews today. On [DATE] at 1:55 p.m., Surveyor interviewed NHA A about the above incident. Surveyor asked what was done when the facility was notified about the sexual abuse allegation. NHA A stated the power of attorney had been called who indicated this relates back to an older incident that R1 experienced many years ago. The names alleged are now deceased . NHA A stated that an interview was conducted today with R1 by NHA A and that R1 stated no one in the facility has hurt her. NHA A stated she would look for any other soft files relating to the investigation that may have been completed. On [DATE] at 5:38 p.m., Surveyor received an email that said, This is what I have. The email contained the admission assessment including skin assessment. Evidence of a thorough investigation into the rape allegation was not provided. Surveyor reviewed a facility policy entitled, Abuse Prevention Program. The policy, dated [DATE], states the following, in part: .5. Investigation .The facility's immediate response is to protect the alleged victim. To protect the alleged victim, the facility has clear delineated roles of those responsible for investigating and will respond to ensure protection of the alleged victim, identify any other alleged victims, ensure the safety of all other residents and the integrity of the investigation. Procedures: The components of an internal investigation will be initiated immediately and may include .an initial evaluation and interview .a psychosocial evaluation .and interviews with potential witnesses .collecting of evidence .documentation. Collection of evidence and documentation will be ongoing until determination is made. All involved persons will be identified including the victim, alleged perpetrator, witness(es) and others with any information about the incident .6. Protection .Staff will respond immediately to protect the alleged victim, all residents .The alleged perpetrator will immediately be removed from the facility and denied access to the alleged victim and all other residents .</p>		