

Department of Health & Human Services
Centers for Medicare & Medicaid Services

Printed: 05/21/2025
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 525476	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/14/2023
NAME OF PROVIDER OR SUPPLIER Luther Home		STREET ADDRESS, CITY, STATE, ZIP CODE 831 Pine Beach Rd Marinette, WI 54143	
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 0690 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	<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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 38793</p> <p>Based on observation, staff interview, and record review, the facility did not provide appropriate treatment and services to prevent a urinary tract infection (UTI) for 1 Resident (R) (R7) of 4 sampled residents.</p> <p>R7 was not provided perineal cleansing after an episode of urinary incontinence.</p> <p>Findings include:</p> <p>The facility's Perineal Care policy, revised June 2010, contains the following information: Perineal care is performed by all nursing personnel to clean the perineum and to provide comfort. It is done as a part of AM and PM care, after bathroom use for residents who require assistance, and after incontinent episodes.</p> <p>7. Use toilet tissue to remove gross soiling. Discard in trash bag immediately. Perform hand hygiene and put on clean gloves.</p> <p>8. Wash skin with soap and water or peri-wash: Wash front to back with 3 motions (middle and each side of peri area) using a clean section of cloth for each pass. Gently dry clean buttocks area, front to back, using a clean section of cloth for each pass. Dry gently.</p> <p>1. R7 was admitted to the facility on [DATE] with diagnoses including Parkinson's disease and dementia. R7's most recent Minimum Data Set (MDS) assessment, dated 7/8/23, documented R1's cognition was 12 out of 15 (the higher the score, the more cognizant). The MDS documented R1 was frequently incontinent of bladder and required extensive assistance of staff for toileting and personal hygiene.</p> <p>On 9/14/23 at 12:05 PM, Surveyor observed Certified Nursing Assistant (CNA)-D assist R7 with changing R7's incontinence brief after R7 was incontinent of a large amount of urine. CNA-D utilized a sit-to-stand lift to bring R7 from the wheelchair to the toilet. CNA-D donned gloves and removed R7's soiled pants and brief. R7 urinated in the toilet and CNA-D wiped R7 with a few squares of toilet paper. CNA-D did not change gloves or complete hand hygiene after removing the soiled items. CNA-D placed a clean incontinence brief and pants on R7 without cleansing R7's perineal area, groin, or buttocks and then transferred R7 back into R7's wheelchair.</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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F 0690 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	<p>On 9/14/23 at 12:19 PM, Surveyor interviewed CNA-D regarding R7's incontinence care. CNA-D verified R7 was incontinent of a large amount of urine and that CNA-D did not cleanse R7's perineal area, groin, or buttocks.</p> <p>On 9/14/23 at 12:45 PM, Surveyor interviewed Director of Nursing (DON)-B who verified CNA-D should have completed thorough perineal care, including washing the perineal area, groin, and buttocks when R7 was incontinent of a large amount of urine.</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Provide and implement an infection prevention and control program.</p> <p>38793</p> <p>Based on observation, staff interview, and record review, the facility did not maintain an infection prevention and control program designed to provide a safe and sanitary environment to help prevent or contain the transmission of communicable diseases and infection, including COVID-19. This had the potential to affect all 63 residents residing in the facility.</p> <p>The facility did not ensure staff performed proper hand hygiene during the provision of cares for 4 Residents (R) (R7, R8, R11, and R13) of 4 residents.</p> <p>The facility did not ensure staff wore eye protection in rooms of residents who were on isolation precautions related to COVID-19.</p> <p>The facility did not ensure staff wore an N95 respirator in a resident's room who was on isolation precautions related to COVID-19.</p> <p>Certified Nursing Assistant (CNA)-D did not appropriately remove personal protective equipment (PPE) or complete hand hygiene when exiting the room of a resident on isolation precautions.</p> <p>CNA-D did not perform appropriate hand hygiene during the provision of perineal care for R7.</p> <p>CNA-E did not perform appropriate hand hygiene during the provision of perineal care for R8.</p> <p>CNA- H did not perform appropriate hand hygiene during the provision of perineal care for R13.</p> <p>CNA-I did not offer hand hygiene to R12 after toileting.</p> <p>Findings include:</p> <p>The facility's Emergency Preparedness-Pandemic/Epidemic Preparedness-COVID 19 policy, revised March 2020, indicates: Employers should select appropriate PPE and provide it to HCP (healthcare providers) in accordance with OSHA's (Occupational Safety and Health Administration) PPE standards .Gloves: Remove and discard gloves when leaving the patient room or care area, and immediately perform hand hygiene. Gowns: Remove and discard the gown in a dedicated container for waste or linen before leaving the patient room or care area .Respiratory Protection: Use respiratory protection that is at least as protective as a fit-tested NIOSH-certified disposable N95 filtering facepiece respirator before entry into the patient room or care area .Staff should be medically cleared and fit-tested if using respirators with tight-fitting facepieces. Eye protection: Put on eye protection (e.g., goggles, a disposable face shield that covers the front and sides of the face) upon entry to the patient room or care area.</p> <p>The facility's Perineal Care policy, revised June 2010, indicates: Wash hands and put on gloves .use tissue to remove gross soiling. Discard in trash bag immediately. Perform hand hygiene and put on clean gloves . Wash skin with soap and water or peri-wash .remove gloves, perform hand hygiene, and put on clean gloves. Place clean incontinent product .when perineal care is completed, remove gloves, wash hands.</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 - Many</p>	<p>1. On 9/13/23 at 12:10 PM on the C wing, Surveyor observed an isolation cart outside of R4's room and a sign on R4's door that indicated R4's room required airborne precautions with only an N95-respirator or higher listed as required. The isolation cart included both disposable and reusable gowns, surgical masks, N95 respirators, and gloves. The isolation cart did not contain eye protection. Surveyor observed the same outside of R9 and R10's rooms on the C wing as well as R5, R6, and R7's rooms on the B wing.</p> <p>On 9/13/23 at 12:10 PM, Surveyor observed CNA-D enter R4's room without wearing eye protection.</p> <p>On 9/13/23 at 12:20 PM, Surveyor observed CNA-F enter R7's room without wearing eye protection.</p> <p>On 9/13/23 at 12:29 PM, Surveyor observed CNA-G enter R6's room without wearing eye protection.</p> <p>On 9/13/23 at 1:04 PM, Surveyor observed CNA-F enter R6's room without wearing eye protection.</p> <p>On 9/14/23 at 11:48 AM, Surveyor observed CNA-E enter R9's room without wearing eye protection.</p> <p>On 9/14/23 at 12:05 AM, Surveyor observed CNA-D enter R7's room without wearing eye protection.</p> <p>On 9/13/23 at 1:00 PM, Surveyor interviewed CNA-D regarding PPE in COVID-19 rooms. CNA-D indicated staff did not need to wear eye protection in COVID-19 rooms.</p> <p>On 9/14/23 at 11:50 AM, Surveyor interviewed CNA-E regarding PPE in COVID-19 rooms. CNA-E indicated there was no eye protection provided to staff to wear in COVID-19 rooms.</p> <p>On 9/14/23 at 12:28 PM, Surveyor interviewed Director of Nursing (DON)-B, who is also the facility's Infection Preventionist. DON-B verified the facility's policy indicates eye protection should be used when entering rooms with residents who are COVID-19 positive. DON-B also verified the isolation carts did not contain eye protection for staff.</p> <p>2. On 9/13/23 at 12:10 PM, Surveyor observed CNA-D enter R4's room wearing a surgical mask, a reusable gown, and gloves. CNA-D was not wearing an N95 level respirator or higher.</p> <p>On 9/13/23 at 1:00 PM, Surveyor interviewed CNA-D who verified CNA-D wore a surgical mask in R4's room, but should have worn an N95 respirator.</p> <p>On 9/14/23 at 12:28 PM, Surveyor interviewed DON-B who verified staff are required to wear an N95 level respirator or higher in COVID-19 rooms.</p> <p>3. On 9/13/23 at 12:10 PM, Surveyor observed CNA-D enter R4's room wearing a surgical mask, a reusable gown, and gloves to deliver a lunch tray. At 12:12 PM, Surveyor observed CNA-D remove and discard CNA-D's gloves and surgical mask. CNA-D also removed the reusable cloth gown. CNA-D did not complete hand hygiene after removing PPE. CNA-D left R4's room with the gown in one hand and a plate cover. CNA-D placed the gown in a hamper near the nurses' station and took the plate cover to a lunch cart. CNA-D touched several items on the lunch cart before CNA-D removed a tray. CNA-D brought the tray to the nurses' station and then completed hand hygiene.</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 - Many</p>	<p>On 9/13/23 at 1:00 PM, Surveyor interviewed CNA-D who verified CNA-D did not complete hand hygiene after removing PPE. CNA-D indicated CNA-D did not dispose of the gown in R4's room because a linen bag was not available.</p> <p>On 9/14/23 at 12:28 PM, Surveyor interviewed DON-B who verified CNA-D should have completed hand hygiene after removing PPE and before touching the lunch cart and another resident's tray.</p> <p>4. On 9/13/23 at 1:12 PM, Surveyor observed CNA-E and CNA-F provide perineal care for R8 after R8 was incontinent of urine. CNA-E donned gloves and removed R8's soiled brief. CNA-E then removed gloves, but did not wash or sanitize hands. CNA-E donned clean gloves, sprayed R8's perineal area with peri-wash and wiped R8 with a washcloth. CNA-E then removed gloves, but did not complete hand hygiene. CNA-E donned clean gloves and washed R8's buttocks. CNA-E then removed gloves, but did not complete hand hygiene. CNA-E placed a clean brief on R8 and placed all soiled linens in a bag. CNA-E boosted R8 in bed and touched R8's blankets, call light, and pillows. CNA-E removed gloves in the doorway and completed hand hygiene before exiting R8's room.</p> <p>On 9/13/23 at 1:34 PM, Surveyor interviewed CNA-E who verified CNA-E did not wash hands between glove changes while completing perineal care for R8.</p> <p>On 9/14/23 at 12:05 PM, Surveyor observed CNA-D provide perineal care for R7 after R7 was incontinent of a large amount of urine. CNA-D donned gloves and removed R7's soiled brief and pants. CNA-E then touched the sit-to-stand lift and lowered R7 onto the toilet. CNA-D touched several drawers in R7's room along with R7's clean clothing and shoes. CNA-D wiped R7's perineal area with a few squares of toilet paper and then applied R7's clean brief, and put on R7's pants and shoes. CNA-D touched the sit-to-stand lift and transferred R7 into R7's wheelchair. CNA-E touched R7's call light and wheelchair before CNA-E removed gloves and completed hand hygiene.</p> <p>On 9/14/23 at 12:19 PM, Surveyor interviewed CNA-D who verified CNA-D did not change gloves or complete hand hygiene after CNA-D removed R7's soiled incontinence brief and wiped R7 with toilet paper.</p> <p>On 9/14/23 at 12:28 PM, Surveyor interviewed DON-B who verified CNA-E should have washed hands between glove changes. DON-B also verified CNA-D should have changed gloves and completed hand hygiene after CNA-D removed R7's soiled incontinence brief and provided perineal care.</p> <p>18815</p> <p>On 9/13/23 at 12:33 PM, Surveyor observed CNA-H and CNA-J provide perineal care for R13 after R13 urinated in the toilet. CNA-H donned gloves and cleansed R13's perineal area. Without removing gloves and washing or sanitizing hands, CNA-H assisted CNA-J with pulling up R13's brief and pants. CNA-H then removed gloves and sanitized hands. CNA-H and CNA-J transferred R13 to R13's wheelchair.</p> <p>On 9/13/23 at 1:09 PM, Surveyor interviewed CNA-H who verified Surveyor's hand hygiene observations and indicated CNA-H should have removed gloves and washed or sanitized hands prior to pulling up R13's brief and pants, but was concerned about R13 standing up even though CNA-J was in the room and R13 was standing without difficulty.</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 - Many</p>	<p>On 9/14/23 at 12:53 PM, Surveyor observed CNA-I assist R12 with toileting. After urinating in the toilet, R12 wiped R12's self with toilet tissue and flushed the toilet. After R12's brief and pants were pulled up, CNA-I assisted R12 to ambulate to bed. CNA-I placed a blanket over R12 and put the head of the bed up for comfort. CNA-I did not offer R12 hand hygiene after R12 wiped R12's self after urinating and flushed the toilet.</p> <p>On 9/14/23 at 1:01 PM, Surveyor interviewed CNA-I who verified R12 wiped R12's self with toilet tissue and flushed the toilet. CNA-I stated CNA-I should have offered R12 hand hygiene after toileting.</p>		