STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016535	A. BUILDING: _____ B. WING _____	R-C 11/06/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NEW CARE FAMILY SERVICES LLC MEQUON I	9945 W WAUWATOSA ROAD MEQUON, WI 53092

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
{M 000}	INITIAL COMMENTS On 11/06/2024, Surveyor conducted a verification visit at New Care Family Services LLC Mequon II. As a result of the survey, 3 new deficiencies were identified. Under statutory provision of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 3	{M 000}		
M 410	88.06(3)(d) INDIVIDUAL SERVICE PLAN The individual service plan shall contain at least the following: This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure individual service plans (ISPs) were completed for 3 of 3 residents. Findings include: On 11/06/2024 at 10:30 AM, Surveyors requested Resident 2, Resident 3 and Resident 4's individual service plan (ISP) from Caregiver (CG) C. CG C stated s/he did not have resident ISP's. CG C stated s/he has worked with the residents and knows the residents. At 11:48 AM, Administrator B arrived at the house and provided Surveyor with Resident 2 and Resident 4's ISP. Administrator B stated s/he had Resident 3's ISP at his/her office and s/he would need to send it to Surveyor.	M 410		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

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M 410	Continued From page 1	M 410		

Resident 2 was admitted to the facility, 09/05/2019, there was no diagnosis' listed in Resident 2's record.

Resident 2's ISP dated 11/06/2023 documented: Eating, grooming, toileting, housekeeping, and general health. Resident 2's ISP identified capacity for self-direction - needs assistance; supervision - 24-hour supervision. The ISP did not identify Resident 2 eats/drinks food out of containers in the refrigerator and eat/drinks food quantity not appropriate. Resident 2's ISP updated 1-7-21 [sic] eating - "[Resident 2] sneaks' food from the kitchen cupboards." The ISP did not identify Resident 2 needing assistance choosing appropriate food and snacks, or the need to lock/secure the food.

Surveyor observed the refrigerator to have a padlock on the door. CG C stated the refrigerator is locked due to Resident 2 getting up in the middle of the night while s/he is sleeping. Resident 2's ISP identified Resident 2 needing 24-hour supervision.

Resident 3 was admitted to the facility, 03/29/2022, there were no diagnosis' listed in Resident 3's record.

Resident 3's ISP dated 10/05/2023 documented: Eating, grooming, toileting, housekeeping and general health. Resident 3's ISP identified Resident 3's level of supervision - needs some supervision; describe - was blank.

Resident 4 was admitted to the facility approximately 6 months ago. Resident 4's ISP was to be sent to Surveyor by 4:00 PM on 11/06/2024. Resident 4's ISP was received on 11/06/2024 at 6:08 PM.

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M 410	Continued From page 2 Resident 4's ISP dated 02/30/2024 (revised 11-6-24 day of survey) documented: Personal cares, behaviors identifying smoking, task of daily living including oral hygiene and showering, ambulation - without assist device, physical health, mental health, social participation, money management and family contacts. Resident 4's ISP did not identify Resident 4's level of supervision needed and if Resident 4 required awake staff. On 11/06/2024 at 12:00 PM, Surveyor interviewed Administrator B. Administrator B confirmed s/he had not updated ISPs to identify the level of supervision needed. Administrator B confirmed s/he had not updated ISPs to reflect Resident 3 and Resident 4's smoking habits or assistance needed. Administrator B stated Resident 2's need for supervision with food in the kitchen and/or Resident 2 taking food out of the refrigerator will be assessed. Administrator B stated s/he will update ISP's and ensure staff know where the ISPs are located. The provider did not ensure ISP's were completed.	M 410		
M 424	88.06(3)(f) REVIEW OF ISP The individual service plan shall be reviewed at least once every 6 months by the licensee, the resident or the resident's guardian, the service coordinator, if any, the designated representative, if any, the placing agency with the resident participating in a manner appropriate for the resident's level of understanding and	M 424		

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M 424	Continued From page 3 method of communication. This review is to determine continued appropriateness of the plan and to update the plan as necessary. A plan shall be updated, in writing, whenever the resident's needs or preferences change substantially or when requested by the resident or the resident's guardian. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 3 of 3 individual service plans (ISP) reviewed was updated at least once every 6 months. Findings include: On 11/06/2024 at approximately 12:00 p.m., Surveyor reviewed resident ISPs: Resident 2 was admitted to the provider's home on 09/05/2019. Resident 2's record included an ISP dated 11/06/2023 updated by Administrator B. Resident 3 was admitted to the provider's home on 03/22/2022. Resident 3's record included an ISP dated 11/06/2023 updated by Administrator B. Resident 4 was admitted to the provider's home approximately 6 months ago. Resident 4's record was not at the home. Administrator B sent to Survey at 6:08 PM on 11/06/2024. Resident 4's ISP dated 02/30/24 with a revised date of 11/6/24 - date of survey.	M 424		

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M 424	Continued From page 4 On 11/06/2024 at approximately 12:00 PM, Surveyor asked Administrator B if Resident 2 and Resident 3 had updated ISPs. Administrator B confirmed s/he had not updated at least once every 6 months, but s/he would update all 3 ISPs and have responsible persons' sign.	M 424		
M 556	88.10(3)(e) Self-Direction Self-direction. To have opportunities to make decisions relating to care, activities and other aspects of life in the adult family home. No curfew, rule or other restrictions on a resident's freedom of choice shall be imposed unless specifically identified in the home's program statement or the resident's individual service plan. An adult family home shall help any resident who expresses a preference for more independent living to contact any agency needed to arrange it. This Rule is not met as evidenced by: Based on record review, interview, and observation, the provider allowed residents' freedom of choice related to community food access and snacks to be restricted - which was not identified in residents' individual service plans (ISPs) or the home's program statement. Findings include: On 11/06/2024, at approximately 11:10 AM, Surveyor toured the home and observed a padlock on the refrigerator. Caregiver C stated Resident 2 eats inappropriate things and drinks out of containers. Caregiver C confirmed the	M 556		

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M 556	Continued From page 5	M 556		

refrigerator is typically locked. Surveyor observed Resident 3 and Resident 4 sitting in the living and going into the kitchen. Caregiver C stated if residents want a snack or drink all they have to do is ask and s/he will unlock the refrigerator and give it to the resident.

At approximately 11:48 AM, Administrator B arrived at the home. Administrator B confirmed the refrigerator is locked so Resident 2 cannot access the food/drink in the refrigerator. Surveyor asked about other residents and Administrator B stated, "all they have to do is ask" and staff will assist them.

On 11/06/2024, Surveyor reviewed Resident 2's ISP, dated 11/06/2023. The ISP identified that Resident 2 did not have advance directives or a power of attorney. There was no indication of the need for Resident 2 to have community food/drink access limited documented in his/her ISP. The ISP identified "[Resident 2] sneaks' food from the kitchen cupboards." The ISP did not identify the refrigerator.

On 11/06/2024, Surveyor reviewed the provider's program statement, admission agreement and house rules, which did not document any routine practice of limiting communal food/drink access.

On 11/06/2024 at approximately 12:30 PM, Administrator B stated s/he would remove the lock off the refrigerator before Surveyor left the facility.